Transitions Into, Through and Out of Homeless: Quantitative Analysis of Administrative Data on Single Adults' Emergency Accommodation Use in the Dublin Region between 2016 and 2018.

By

Clíodhna Síle Bairéad

The thesis is submitted to University College Dublin in fulfilment of the requirements for the degree of Doctor of Philosophy in Social Policy

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In addition to having no evidentiary basis (O'Sullivan, 2020), the use of hostel style temporary accommodation has been shown to lengthen the amount of time people remain in homelessness (Tsemberis & Henwood, 2016) and have a detrimental impact on the mental wellbeing of people who experience homelessness (Fitzpatrick, 2000; Hoffman & Coffey, 2008; McMordie, 2020). Staying in hostel style accommodation may, in some jurisdictions, even carry increased risk of criminalisation through cooperation between shelter providers and police forces (Herring, 2021). Further research has shown that hostel style accommodation is not suitable for habitation and may be used by the organisations who run it as a form of control (Dordick, 1997; Joniak, 2005; Marcus, 2003; Marr, 2012; Stark, 1994). 60

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Abstract

This thesis employs statistical analysis of administrative data on single adult users of emergency accommodation for homeless people in Dublin. Together with theories of 'housing transitions' (e.g. Beer, et al, 2011; McNaughton, 2008) and the structural, experiential and life course factors which shape these, a new framework has been generated to analyse, explain and predict patterns of entry and exit from homelessness and of emergency accommodation use. In addition to making an original theoretician and empirical contribution to research on homelessness this analysis has the potential to inform the reform of homeless service to maximise rates of exit from homelessness.

The data, which cover the period 2016-2018, are drawn from a local government managed on-line database which records each homeless person's emergency accommodation use, their demographic characteristics, personal histories and medical and addiction treatment. They were collated, cleaned and analysed using a variety of statistical techniques including, descriptive statistics, crosstabulation reports and cluster analysis.

This analysis suggests that extensive literature on homeless emergency accommodation use underestimates the importance of stability of service use in predicting chances of exiting homelessness. Many homeless people use this accommodation solely for short-term emergency housing and then leave without support. However, very stable emergency accommodation users, who use this accommodation for 95% or more of their period of homelessness, are more likely to remain homeless for longer and to need support (eg, social housing provision) in order to exit.

Patterns of emergency accommodation entry, usage and exit also vary significantly across the life course and depending on prior and concurrent significant life crises. Homeless people of all ages are highly likely to have experience of institutional living in prison, residential care or mental health or additional treatment facilities for instance. For young people entry to homelessness is associated with breakdown of relationships with parents or caregivers.

Statement of Original Authorship

I hereby certify that the submitted work is my own work, was completed while registered as a candidate for the degree stated on the Title Page, and I have not obtained a degree elsewhere on the basis of the research presented in this submitted work.

Clíodhna Bairéad

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Glossary of Terms

Adult – A person over the age of 18 as defined by the Child Care Act 1991.

AHB – Approved Housing Body: non-profit sector provider of social housing.

AHN – Assessment of Housing Needs

DoHLGH – Department of Housing, Local Government and Heritage

DSP – Department of Social Protection

DRHE – Dublin Region Homeless Executive: funds and manages homeless services in the Dublin Region.

EA - Emergency Accommodation: allocated by the Dublin City Council Central Placement Service. Includes hostels/shelters, congregate accommodation (such as family hubs), hotels and B&B's.

HAP – Housing Assistance Payment: state subsidised rent in accommodation owned by a private landlord.

Homeless – Two definitions of homelessness are considered here. The first is the Irish legal definition as defined in the Housing Act (1988) section 2. The European Typology on Homelessness and Housing Exclusion has also been considered. The two categories which have been used herein; rooflessness (without a shelter of any kind, sleeping rough); and houselessness (with a place to sleep but temporary in institutions or shelter). These two categories also hall within the Irish legal definition.

HSE – Health Service Executive: provides public health and social care services nationally.

LA housing – Local Authority provided social housing.

Long-Term Bed – EA beds accolated to a specific individual on a multi-night as opposed to a single-night basis.

Rough Sleeper – An adult individual who has slept in the open air (such as on the street, in a tent, in a park, on a bench or bus shelter) or in a structure not suitable for human habitation (such as delict buildings, stairwells, public toilets or public service buildings like bus/train stations). This definition does not include squatters, protesters

or individuals who have accommodation and intentionally sleep out for purpose or pleasure (such as people camping illegally on public lands).

Single Adult: An adult or couple who are in EA without children.

Social Housing – Housing provided by Local Authorities or Approved Housing Bodies for which the state subsidises rent paid.

NGO – nongovernmental organisation.

NPO – Not for profit organisation/non-profit organisation.

PASS – Pathway Accommodation and Support System: the national management and allocation system for accommodation and services for homeless people.

RAS: Rental Accommodation Scheme

RS – Rent Supplement

Acknowledgements

Like many people, during my undergraduate studies I was focused on the problems of the world. I looked outward at other countries and all the things they needed to change. A fellow student changed my outlook when he asked the simple question 'everyone is so obsessed with changing the world, why does no one start with Ireland?'. I have since realised that many academics and researchers have started with Ireland, but that conversation changed my perspective. I have had countless conversations since then with fellow students which have changed my outlook and opinions and I thank each of them for their help in developing how I think about the challenges which face us.

Throughout my studies I have had constant support from the academic community both for inside and outside my university, I am so grateful for their generosity of time and advise. I would like to thank a few of them in particular. During my undergraduate studies at NUI Galway, I was inspired by many of my lecturers and their passion for their areas of research. In particular, Dr Michelle Millar put a lot of time and effort into supporting me both in and out of the classroom. She gave me an internship, provided advice and gave constant encouragement throughout my degree. She was the first person to tell me I could go on to get a PhD, I am so grateful that she did, I would not have had the confidence to continue my academic studies without her.

I also wish to thank Dr Muireann Ní Raghallaigh who I met when I approached her about being a summer research assistant. She took a chance on a second-year undergraduate student and gave me the opportunity to see the world of academia outside of my first university. She is also the person who persuaded me to consider UCD for my master's studies, advice I am very glad I followed.

When considering starting this thesis I spoke to many people about the current most pressing issues in Irish society. The common theme within these conversations again and again was housing and homelessness. During this time, I was studying for my master's degree and one of my modules was on housing policy in Ireland, delivered by Dr Michelle Norris. This class compounded the conversations I was having and inspired me to peruse research on homelessness. Michelle supervised my master's thesis and has continued her support in supervising my doctoral research. I have been incredibly lucky in having Michelle as a supervisor. Her support, advise,

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Introduction

Introduction

The experience of homelessness is one which runs deeper than the type of accommodation (or lack thereof) where one sleeps. A person's home is a statement of belonging and of one's place within society. The inner sphere represents the private life and that which allows us to feel safe and secure, the outer sphere (the outside walls) displays our belonging to the outside world and tells it something of who we are (Arendt, 1958). The lack of a home therefore is the opposite of this, a state of ostracization from society, of being 'othered' (Arnold, 2004).

Responses to homelessness have varied widely both over time and space. Within the European Union (EU), each member state has some level of state intervention in terms of reducing or preventing homelessness occurring. Despite this, homelessness has been increasing across the EU in recent years (Foundation Abbé Pierre/FEANTSA, 2019). In response to the increasing homeless crisis, EU member states have committed to actively attempt to end homelessness within the EU by 2030 (Council of the European Union, 2021). As one of the signatories of the European Platform on Combatting Homelessness, the Republic of Ireland has committed to end homelessness and improve access to affordable housing by 2030.

Since joining the EU in 1973, Ireland has rapidly become one of the richest and fastest developing economies in the world. GDP per capita is high at €66,000 (Trading Economics, 2019) and the GINI index indicates relatively average levels of inequality at 32.8 (The World Bank, 2016). Despite its relative wealth and growing economy, Ireland still faces significant social challenges, one of the most pressing of which is sufficient provision of affordable housing.

The Irish State's recognition of homelessness and its responsibility to respond to the issue was first legally underpinned in 1988 by the Housing Act introduced in that year. Section 2 of this Act provides a legal definition of homelessness:

> A person shall be regarded by a housing authority as being homeless for the purposes of this Act if— (a) there is no accommodation available which, in the opinion of the authority, he, together with any other person who normally resides with him or who might reasonably be expected to reside with him, can reasonably occupy or remain in

occupation of, or (b) he is living in a hospital, county home, night shelter or other such institution, and is so living because he has no accommodation of the kind referred to in paragraph (a), and he is, in the opinion of the authority, unable to provide accommodation from his own resources.

The 1988 Housing Act allocates responsibility for providing accommodation for people experiencing homelessness to local authorities. They are empowered to provide funding for homeless specific accommodation and services by Section 10 of the Act. The Housing (Miscellaneous Provisions) Act 2009 provides further clarity on the provision of housing supports and services by local authorities. It also requires all local authorities to adopt a homeless strategy.

In 1996 the four local authorities responsible for the Dublin region – which includes Ireland's capital and largest city - established the Homeless Initiative, which was tasked with building relationships between voluntary organisations and public agencies involved in providing services to homeless people to create a collaborative framework to address homelessness in the Dublin region. This initiative was transformed into Homeless Agency in 2001, which became the Dublin Region Homeless Executive (DRHE) in 2011. The DRHE is the lead statutory authority for homeless service funding and management in the Dublin region. It also manages the online bed allocation and management system for emergency accommodation (EA) called the Pathways Accommodation and Support System (PASS) on behalf of local authorities nationwide. EA is temporary accommodation specifically for people who have become homeless. In the Irish context it includes hostels and congregate accommodation primarily provided by non-profit organisations, private hotels and private B&B's.

Despite legal recognition of homelessness and the extensive policy responses, described above , homelessness in Ireland has increased significantly over the past decade and consequently has become an ever more pressing concern for policy makers, service providers and social activists (O'Sullivan, 2020). Between July 2014 and December 2021, EA use increase by 174%. The month with the highest EA use during this time period was October 2019 when 10,514 people used EA (DoHLGH, various years). Although the greatest proportionate increase in homelessness has occurred in rural areas, in absolute terms, the vast majority of the homeless population is concentrated in Dublin. 72% of the homeless population lived in Dublin and the

region surrounding it in December 2021. Homelessness among families with children has been the primary driver of the growth in homelessness in Ireland because rates of family homelessness in Ireland were very low prior to 2014. However, single adults still account for a significant proportion of people in homelessness, they accounted for 53% of the individuals and an estimated 81% of the household units in EA in December 2021 (DoHLGH, various years).

The rise in homelessness has been accompanied by a rise in associated public spending. Local authorities spent €66 million in homeless services in 2014 (this funding is allocated under the terms of Section 10 of the Housing Act, 1988), compared to €212 million in 2020, an increase of 221% (Department of Housing Local Government and Heritage, various years). Local authority expenditure on EA specifically increased from €36m in 2014 to €171m in 2020. However, these figures understate the true scale of spending on homeless services because they don't include public spending on health and social care for homeless people (which is allocated by the health service), charitable donations to non-profit sector homeless service providers or indirect costs such as policing and street cleaning (O'Sullivan & Musafiri, 2018).

The scale, spatial and socio-economic manifestation of this growth in homelessness is strongly related to the differential growth in incomes compared to house prices and rents since Global Financial Crisis (GFC), which in turn reflects a marked concurrent differential between housing output and population growth. Income growth has slowed in recent years and average incomes increased by just 8% between 2012 and 2018 (CSO, 2012, 2018). Meanwhile, the cost of private sector rents in the Dublin region increased by an average of 74% during the same period (Lyons, 2013, 2019).

Ireland's social housing sector is small by western European standards (although not when compared to the standards of most other developed countries). Social housing, which is provided by local government and non- profit sector housing associations in Ireland, accommodated 8.7% of households according to the last census, which is around half the average in neighbouring countries (Drudy, 2016). However, a more significant issue, from the perspective of the growth in the rates of homelessness, is that government funding for new social housing output was cut by some 80% following the global financial crisis and although output has increased again in recent years it

has failed to keep pace with growth in population and housing need (Byrne & Norris, 2018). Due to the combination of these factors, the key driver of rising homelessness has been households losing their private rented tenancies while being unable to secure alternative accommodation in the social housing sector (Hoey & Sheridan, 2016).

Since the year 2000 there has been a slew of policy responses, new services and housing initiatives intended to address homelessness. The national policy statement published that year - *Homelessness – An Integrated Strategy* advised that more diverse housing be made available to accommodate the diverse needs of those who experience homelessness as well as an expansion of supports and services using an integrated approach (Government of Ireland, 2000). The Irish government's latest policy statement on housing– *Housing for all: A new Housing Plan for Ireland*– includes eliminating homelessness by 2030 as one of its key strategy objectives. To achieve this aim the strategy outlines a combined approach of housing and support services for different groups who experience homelessness (including single adults, families, potential Housing First clients and young people) (Government of Ireland, 2021a). These policy developments and subsequent implementation (particularly in terms of spending) are a positive step and obviously better than no policy response at all. However, previous policies have failed to produce substantial change in the number of people who experience homelessness which (prior to the Covid 19 pandemic) was rising steadily year and year. The focus of these policies has varied very little since 2000 despite the scale of the issue becoming significantly larger.

One policy initiative which has proved an exception to this trend and appears to be reaping positive outcomes is Housing First – a programme which was originally introduced in the United States and has been the subject of extensive research which indicates that it is very effective at combatting homelessness (Tsemberis & Henwood, 2016). Under the Housing First model people who experience homelessness are housed and then receive support based on their needs as opposed to the treatment first model under which the reverse is applied. The treatment first model, works on the presumption that people must be prepared to move into housing from homeless accommodation rather than assessing the individuals ability to live independently before introducing supports (Burnes, 2016). Housing first began in Ireland with a pilot programme running from 2011-2014 as a collaborative effort between service

providers and the DRHE. The programme was re-funded between 2014-2017 (Peter McVerry Trust, 2020). In 2017 a national 'Housing First' programme was proposed and was initiated in 2018 (Government of Ireland, 2018b; Pleace & Bretherton, 2013). This national implementation plan is currently being implemented and it aims to provide immediate permanent housing as the first response to homelessness for individuals with addiction and mental health issues, coupled with additional supports as required. It marks a significant departure from standard practice heretofore whereby homeless people were expected to 'staircase' from EA, to transitory accommodation with support and finally to permanent accommodation (Phelan & Norris, 2008). Although Housing First has been proven to be highly effective in ending homelessness for those who qualify for the programme, the number of people who fit the criteria in Ireland is small relative to the number of people who experience homelessness. *The Housing First National Implementation Plan* identified 737 individuals who met the criteria for Housing First (Government of Ireland, 2018b), they represented approximately 12% of the adults using EA at the time (DoHLGH, 2018).

Research on Homelessness in Ireland and Internationally

In tandem with increased policy making and public concern about homelessness, research on homelessness in Ireland has also expanded significantly in recent decades. Most of this research employs a qualitative design. Specific groups, such as women (see: Mayock et al., 2015), families (see: Hoey & Sheridan, 2016) and young adults (see: Mayock et al., 2014; Mayock et al., 2008; Mayock & Parker, 2017) have had been researched from a qualitative perspective. Since the development of PASS in 2011, quantitative research using administrative data has become more feasible and research on families (see: Morrin, 2019; Parker, 2021), young single adults (see: Bairéad & Norris, 2020) and single adults (see: Waldron, O'Donoghue-Hynes and Redmond, 2019) have been published. Academic analyses of the policy response to homelessness have also been produced (see: Allen et al., 2020; O'Sullivan, 2020).

The research conducted in the Irish context reflects the themes and methods used in the wider international academic research. The methods used in different research projects have tended to be either quantitative or qualitative. Although mixed methods studies do exist in the field (see: Fitzpatrick, Bramley and Johnsen, 2013; Kidd *et al.*, 2016; Parker, 2021), they are less common than single research method projects.

One of the most commonly used and influential methodologies in qualitative research on homelessness is the 'Pathways Approach' which has been operationalised primarily through interviews with small groups who share a common experience or characteristic (for example: young people, women, members of the LGBTQI+ community, et cetera). The concept of pathways in the context of housing was originally presented by David Clapham (2005) as a framework which can be used to analyse the changes in housing experiences over time, depending on household dynamics, personal characteristics and life stages, resources and access to housing. This framework has been used to investigate pathways into, through and out of homelessness (Pillinger, 2007; Mayock, Corr and O'Sullivan, 2008; Anderson, 2010; Tutty *et al.*, 2013). The Pathways Approach has provided with valuable insights into the experience of homelessness amongst people who have multiple vulnerabilities. Understanding of these vulnerabilities and how they may increase the likelihood of experiencing homelessness among certain groups (particularly care leavers and members of the LBTQI+ community) has immense value in both the academic world and for providers of target support services. However, this model cannot provide general insights into the causes of homelessness or potential solutions for most of the homeless population (Ravenhill, 2008). In addition, the application of the pathways framework in practice has been criticised for its failure to adhere properly to Clapham's ideas, to the extent that some authors have argued that it is usually used more as a 'metaphor' than a coherent theoretical framework (Fopp, 2009).

Quantitative research on homelessness has been slower to emerge in Europe and also in research focused on the housing provision and policy related dimensions of homelessness. The potential of quantitative research has been recognised among homelessness researchers for decades (Cohen & Sokolovsky, 1989; Farr, Koegel, & Burnam, 1986) although the full potential has yet to be realised (Connelly et al., 2016; Culhane, 2016). Its utility was brought to the forefront of homelessness research through the work of Dennis Culhane, Randall Kuhn and colleagues and in particular in three landmark papers they published in the 1990s which examined administrative data on single adult users of EA (which they call shelters) in several different cities in the United States (Wong et al., 1997; Culhane & Kuhn, 1998; Kuhn & Culhane, 1998;). In the first of these papers, patterns of service utilisation among families in homeless accommodation in New York were discussed in relation to the new insights

administrative data can impart. Primarily, this research demonstrated that the stereotype that people in homelessness were older men with addiction issues was inaccurate and in reality the homeless population was diverse in terms of age, gender and support needs (Wong et al., 1997). Following this paper, Culhane and Kuhn focused their attention on homeless shelter use among single adults in New York and Philadelphia. The first of these papers focused on predictors of service use (Culhane & Kuhn, 1998) and the second presented a three-part typology of patterns of service use (Kuhn and Culhane, 1998). This typology identifies three typical patterns of usage of homeless services which reflect 'homeless episodes' meaning breaks in their shelter use of 30 days or more. These are:

- transitional which applies to individuals who use shelters for less than 100 days and who have very few homeless episodes.
- episodic which includes individuals who have multiple homeless episodes, and
- chronic which applies to individuals who use shelters for a long period of time but who have very few homeless episodes.

Although this typology has provided significant and important insights into shelter use patterns, thus far, shelter data analyses have only examined a very narrow window of time in the lives of homeless people and therefore does not consider additional experiences of homelessness or other aspects of their 'housing careers' (McAllister et al., 2011). Having additional access to information on an individual's housing career can provide significant insight into an individual's life experience, support needs and prospects of exiting and also re-entering homelessness (Goering et al., 2002).

The qualitative and quantitative researchers on homelessness have therefore reached important findings. However, the two literatures have operated largely separately and the lessons from the two literatures have rarely been compared to examine whether they confirm or contradict each other's findings. A key unanswered question in homelessness research is: are the experiences highlighted in the qualitative research on homeless pathways confirmed by quantitative analysis of administrative data on homeless people? To put it another way, can we find the micro in the macro? A second key unanswered question is whether the findings of the qualitative research on homelessness in terms of pathways through homelessness and the factors which shape these, support the findings of the quantitative research and particularly Culhane and Kune's typology of patterns of emergency accommodation.

In the applied social sciences, the impact of academic research on policy and service provision is an important consideration. Some research in homelessness has been enormously influential. Housing First (Tsemberis, 2010) is currently the most prominent example of how research using practice based evidence can have an international impact. Housing First is now employed in many countries including England (Housing First England, 2019), Canada (Hasford et al., 2019; Nelson et al., 2019), Australia (Johnson et al., 2012), New Zealand (Pierse et al., 2019) and multiple countries across the EU (Volker Busch-Geertsema, 2013). However, relative to the number of people who experience homelessness, the impact of Housing First has been small, primarily because it is aimed at a small group with high support needs who experience long-term homelessness and/or engage in rough sleeping (Government of Ireland, 2018b). Other analytical frameworks, such as the Pathways Approach may have influenced specific service providers in their service delivery approach but have not been adopted at the national level.

Despite the Irish government's committed to end homelessness by 2030 (Council of the European Union, 2021), in reality 'ending homelessness' is more likely to be reaching 'functional zero homelessness'. Functional zero would be reached when a very low number of people become homeless and that when they do they remain homeless for a very short period of time (Turner et al., 2017). The challenge of reaching functional zero is multi-fold, as homelessness is a multifaceted experience (Somerville, 1992) and tackling it requires multifaceted responses. This involves prevention and rehousing strategies (Anucha, 2005) but also supports to ensure the cycle of homelessness which may be where the individual experiences homelessness multiple times as an adult (Anucha, 2005; Aubry et al., 2013; Benjaminsen & Andrade, 2015; Culhane & Kuhn, 1998; Kuhn & Culhane, 1998; Waldron et al., 2019) or where they had experienced poverty or homelessness as a child (Bramley & Fitzpatrick, 2018; Fitzpatrick et al., 2013; Johnstone et al., 2016; Stafford & Wood, 2017).

Evidence shows us that the way to reach function zero is a combination of ensuring access to appropriate housing (Crowley, 2016) and highly flexible and individualised services for homeless people (Henwood et al., 2015). Recent Irish policies do reflect this message (Government of Ireland, 2016, 2021a). However, these policies have failed to achieve their objectives in full (Allen et al., 2020) indicating that the disconnect

between the objectives of policy and their outcomes is not the result of not knowing what needs to be done, but rather in successfully translating this into practice.

Ireland faces a number of challenges in rectifying this disconnect. The first is in terms of housing. The current housing market is under immense pressure as prices exceed affordability for many (McGinnity et al., 2021) and delivery of new housing to relieve the pressure has been slow and often inappropriate (Lyons, 2018). The social housing sector, which plays an important role in terms of addressing homelessness (O'Donnell, 2021), has also been under significant pressure because demand (Housing Agency, various years), greatly outstrips supple (DoHLGH, various years).

Services for people who experience homelessness in Ireland are primarily provided by the non-profit sector. This sector is still developing and includes many organisations which operate with a high level of professionalism and expertise. For instance, some organisations now require front line workers to hold a qualification in social care or similar. The DRHE have also introduced professional standards for the sector (DRHE, 2019a). Current government and regional strategies name non-profit organisations as part of their multi-organisation approach to ending homelessness (Government of Ireland, 2021a) and representatives from these organisations are part of the homelessness consultative forums set up by local authorities under Section 38 of the Housing (Miscellaneous Provision) Act, 2009. However, regulation is limited to those organisations who receive public funding. Non-profit organisations which are funded solely by donations are subject only the minimal regulation provided by the Charities Act (2009) and receive less scrutiny and oversight from their local authorities. This lack of regulation creates risks in terms of ensuring safe and appropriate services are delivered to a population as vulnerable as those who experience homelessness. Part of the challenge faced within Ireland is that people who experience homelessness have yet to receive the recognition of being a highly vulnerable population and receive the state protections such recognition would bring.

In the Irish context service provision design and delivery structures have not changed to reflect the findings from research on homelessness. This has been clearly demonstrated in the recent intervention in prevention of care leavers entering homelessness. Although homelessness researchers and youth specific services have put significant resources into this group, a reduction in care leavers entering

homelessness came after the child and family agency (TUSLA) introduced after-care supports (Carr, 2014). Another example is the continued use of multi-occupancy rooms for single adults. Despite evidence that multi-occupancy rooms increase perceived risk by EA users and, as a result, increase the level of stress they experience as well as decreasing their trust and likelihood to use the service (McMordie, 2020), this type of EA remains commonplace. There is also a lack of access to mental health services and trauma informed care, though this is not exclusive to homeless services but rather a national challenge in of itself (Finucane, 2021; Hyland et al., 2021).

The disconnect between research evidence and services design and delivery not only impacts those who experience homelessness but also the homeless policy and services sector itself. There is significant friction between non-profit service providers and the state. For example, non-profit service providers regularly call for more funding, despite the fact that the state has dramatically increased funding in recent years. This conflict emphasises the fact that reaching zero homelessness is not just about having sufficient funding but also about ensuring that funding is used in an appropriate way in order to achieve its maximum impact.

Aim and Objectives

This thesis was inspired by the two critical disconnects in the research on homelessness outlined above. These are:

- the disconnect between the quantitative and qualitative literature on homelessness and,
- The disconnect between academic research on homelessness and the design of policies and services.

One barrier to eliminating these disconnects is that there is very little detailed and comprehensive information available on users of EA in Ireland. Although many in-depth qualitative studies of EA users have been conducted, as explained above, these focus on very small groups, who are rarely representative of the EA using population at large. The comprehensive data on this population which is published each month by the Dublin Region Homeless executive are not in-depth. It merely enumerates the numbers of homeless people living in different parts of the country and provides some basic information on their demographic profile.

To address these disconnects this thesis aims to use administrative data gathered from PASS on single adults' EA service use in the Dublin Region. It will examine their transitions into, through and out of homelessness and how these change over the life course and are influenced by demographic characteristics and life histories.

To achieve this broad aim this thesis will address the following specific objectives:

- enumerate EA use by single adults in the Dublin region between 2016 and 2018,
- Identify patterns of EA usage among this population specifically in terms of entries into EA, service use time period and exits from EA.
- Identify the demographic characteristics of this population and assess whether these are associated with different patterns of EA usage.
- Identify the extent to which relevant personal histories of this population have been recorded in PASS and explore whether these are associated with different patterns of EA usage.
- Explore how the concept of transitions may be applied to the results of these analyses.
- Explore if Culhane, Kuhn and colleagues' typologies of transitional, episodic and chronic homelessness are the 'best fit' for understanding single adults EA service use in the context of the PASS data and the Dublin region.
- Explore alternative typologies of homelessness which could enable richer understanding of single adults EA service use in the context of the PASS data and the Dublin region.

Data Source and Collation

To achieve these ambitious aims and objectives, the analysis presented here will draw on data from PASS which allows homeless service providers to input service-user data, including their access to and departures from EA. Each service user registered on PASS is given a unique identifier number, which enables them to access multiple services (EA, support services, addiction support) without needing to provide these services with duplicate information. PASS allows service providers to keep notes about client engagement, accommodation bookings and services received. As mentioned above, the PASS database is managed by the DRHE and this organisation

facilitated access to the database and also provided training in its use to the researcher.

The specific PASS data examined in this thesis relates to the EA use of single adults who first presented to accommodation between 2016 and 2018 in the Dublin region. Single adults (i.e., people not in a family unit and aged 18+) who entered homelessness between the 1st of January 2016 and the 31st of December 2018 were included in this research. The Dublin region includes Dublin city centre and the surrounding inner and outer suburbs and encompasses the operational area of four local authorities – Dublin City Council and Dún Laoghaire-Rathdown, Fingal and South Dublin County Councils (see Figure 0.1). These individuals' continuing use of EA was checked up to the week of the 25th of March 2019. A total of 3,669 individuals have been included in this research. Each of these individuals had given consent to having their data used for secondary purposes. A key advantage of using these administrative data for research is that they include the entire consenting research population – in this case all single adults who used EA in the Dublin region during the period under examination.

This is the first time an external researcher has been granted access to PASS for research purposes and this access enabled the researcher to purpose build the data set used here specifically for this thesis. The cooperative relationship upon which this agreement was based represents an alternative method of conducting research on homelessness in Ireland which has the potential to be used more in the future. While the Irish government tends to be forthcoming with data for research purposes researchers are often limited by the data format (previously Excel sheets in the case of the DRHE) or in their research topic (when researchers are employed on a temporary basis by a state body to conduct a tendered piece of research). Whereas the data access provided for this thesis enabled more in-depth analysis of the PASS data than has been conducted previously.

PASS stores a significant quantity of information regarding EA users in Ireland. These data hold potential for furthering our understanding of how people use EA and improving the services provided in the future. However, as administrative data, from a research perspective, there are limitations which restrict the questions which can be answered. The primary limitation of administrative data is that the information has

already been gathered for a primary reason and cannot be expanded beyond that scope. While researchers may choose to apply a mixed methods approach to overcome this limitation as has been done using PASS data by Sarah Parker, 2021, this thesis will use a quantitative approach in order to test and demonstrate the potential and limitations of this administrative data in research.

As the PASS data has been collected to allocate EA beds as opposed to for academic research purposes, the variables stored on the system are limited to those which are relevant to service provision. The aims and objectives of this thesis have taken the limitations of the PASS data into consideration. The analytical framework, discussed below, is based largely on qualitative research but has been adapted in order to be appropriate for use in quantitative research. This adaptation of previous theoretical frameworks will contribute to reducing the disconnect between quantitative and qualitative research in the field which is one of the aims of this thesis.

Figure 0.1 Map of All Local Authorities in Ireland and of the Four Local Authorities Responsible for the Dublin Region

Analytical Framework

One challenge faced when completing this thesis was that none of the available analytical frameworks fit the data being used appropriately. In order to overcome this challenge a new analytical framework to was devised on the basis of an in-depth review of the relevant literature. It employs three primary concepts: the life course, transitions and experiences of contributory events. By combining these three concepts a more robust framework has been developed which allows the data on EA users to be analysed and presented in a systematic which is appropriate for achieving the aims and objectives outlined above. This framework has been devised specifically for use with administrative data on use of emergency accommodation for homeless people and therefore it offers richer insights than other frameworks such as Clapham's (2002) pathways model which are commonly used in research on homelessness but were not designed specifically for this purpose. .

The importance of the life course in terms of understanding the human experience has been well established in academic literature (Worth & Hardill, 2015). This concept is obviously relevant to housing because as we move through the life course our housing needs will change depending on our individual circumstances (Feijten & Mulder, 2005). Consequently, this concept has been commonly discussed in the academic literature on housing and several perspectives and a number of perspectives have been developed (Beer et al., 2011). These perspectives include housing careers (Kendig, 1984), housing histories (Forrest, 1987) and housing pathways (Clapham, 2005). Housing transitions have been selected from these concepts as a central concept which underpins the analysis presented in this thesis. In their book *Housing Transitions Through the Life Course*, Beer, Faulkner, Paris and Clower (2011) propose that '[i]t is helpful to think of a lifetime of housing transitions as a series of housing decisions about whether to move or not move, the quality and quantity of housing to occupy, location relative to employment and social networks' (Beer et al. 2011, p.31). This focus on key turning points is particularly useful for examining the transition from being homeless to being housed and vice versa. This focus is also more practicable for homelessness research, because homeless people often live chaotic lifestyles, which are difficult or impossible to comprehensively document, and therefore to identify their entire housing pathway or housing career,

The concept of transitions has been used in research on homeless by several authors (Hyde, 2005; Orwin et al., 2005; Piliavin et al., 1996). Among these, Carol McNaughton's use of the concept in her 2008 book, *Transitions Through Homelessness: lives on the edge*, was particularly influential on the analysis presented in this thesis. Her study draws on interviews conducted with 28 homeless people over the course of a year, which examined their transitions into and through homelessness. It provides original insights into transitions through homelessness, particularly in terms of 'edgework' meaning risk taking behaviour. However, it draws on a small cohort of interviews and this thesis provides an opportunity to test the finding of a qualitative study from a quantitative perspective, thus addressing one aspect of the disconnect between qualitative and quantitative research identified above.

Age has also previously been identified as a significant factor in much of the international research regarding experiences of homelessness (e.g. Kuhn and Culhane 1998, Fitzpatrick 2000, Warnes and Crane 2006, Aubry *et al.* 2012, Mayock and Corr 2013). In order to apply this dimension to the research presented here, the housing life course stages discussed in Beer et al.'s (2011) book coupled with Irish census data (see: CSO.ie – Irish census data on employment, housing, household composition and poverty rates) have been used to establish age cohorts. The concept of the life course, meaning not just age but life stage, has yet to be fully explored in relation to homelessness. This thesis examines this concept through examining how the experience of homelessness changes across each of the age groups which have been established within the data.

The importance of experiences and influences beyond a housing need in precipitating homeless is well established in homelessness research. These experiences included the breakdown of personal relationships, domestic violence, loss of income, challenges with mental health, drug and/or alcohol dependency and youth homelessness (Anderson & Christian, 2003; Bramley & Fitzpatrick, 2018; Chamberlain & Johnson, 2013; Fitzpatrick, 2005; Johnson et al., 2008). However, the extent to which these additional experiences (which are called 'contributory events' in this thesis) can be explored within this thesis was limited due to the nature of the data used. While some contributory events are recorded on PASS, the individual's perspective on how these experiences has impacted their entry to EA, their time in EA or how they exited EA has not. In order to utilise the information that is available, this

thesis examines four categories of contributory events life, health, institutional and homeless events. These events have been defined by combining life stage indicators defined by Beer et al (2011) and events described by McNaughton (2008). Due to the limitations of the PASS data however, not all aspects of Beer et al's (2011) life stage indicators and McNaughton's (2008) events are included in the contributory events examined here. Evidence of the impact of contributory events or experiences from the wider literature has been taken into account when devising the definitions of contributory events used in this thesis. For example, health events include experiences with mental health or addiction challenges as well as disability or physical heath. Life events include having children (who have not accompanied their parent into EA), being in a couple or moving country. Instructional events include being accommodated in state care as a minor or prison as an adult. Homeless events include being previously homeless, moving local authority region while homeless and sleeping rough

Methods

This thesis will use quantitative analysis of administrative data as its primary research method. The use of administrative data specifically (Connelly et al., 2016) and quantitative research methods (Imai, 2017) more generally are still developing within the social sciences. Part of this development has been the internet revolutionising our ability to gather and store data (Imai, 2017), the technology which allows PASS to exist is less than 30 years old and having internet access reliable enough to engage with this software is even newer, particularly in some parts of rural Ireland. While this technology has been developed, social scientists have had to establish what can be analysed using the newly available data. The question of how to examine human behaviour has been grappled with for decades (Mischel, 2004), quantitative analysis in social sciences, for example, often uses data which can primarily be used to stetch patterns of behaviour, not the reasons for the behaviour (Stockemer, 2019).

As mentioned above, administrative data has obvious limitations because has been collected for a primary purpose other than research (Connelly et al., 2016). However, administrative data is particularly useful when researching social policy as it not only provides data on the individual it also shows us what information the state deems important for the issue being addressed. The information gathered on PASS for

example, not only tells us how single adults are using EA but also what information the DRHE has deemed necessary to include on PASS profiles. The case notes logged for individual users by key workers further shed light on what service providers consider to be relevant information to log and share on PASS in relation to individual service users. In short, administrative data informs us about the behaviour of both the individual, the data collector and the service provider and thus provides insights into the relationship between the individual and the state.

Outline of Chapters

The remainder of this thesis is divided into eight further chapters. Chapter One is a policy review of relevant Irish policy in the field of homelessness and responses to homelessness. Chapter Two presents the literature review which explores the relevant research and explains how it has influenced this thesis. Chapter Three outlines the methodology used to operationalise this research including how the data was collected and how the quantitative analysis techniques used were selected and applied. Chapter Four which examines the Culhane, Kuhn and colleagues' aforementioned three-part typology of homeless shelter use and proposes a new, alternative, four-part typology for examining EA use. Chapter Five examines transitions into homelessness, this analysis focuses on previous accommodation and reasons for homelessness. Chapter Six explores transitions through homelessness. This chapter merges the four-part typology developed in Chapter Four with the transition's framework. Chapter Seven explores the analysis of EA departure transitions and the implications thereof. The final chapter is the conclusion which will detail the findings of this research and reflect on their implications for the research literature on homelessness and for homeless policy and, practice.

Chapter One   Policy Context: Homelessness Rates, Drivers and Policy Responses in Ireland and Dublin

Introduction

> Social policy is concerned with understanding the social and economic structures central to people's lives, life chances and quality of life. At its core, social policy is about the study of how human needs are met, how we respond to risks we face and the ways in which well-being is interpreted and used to shape policy priorities and outcomes (Dukelow and Considine, 2017: 1).

Social policy issues are intertwined within the issue of homelessness, specifically in terms of how people use state funded services and how successful these services have been in achieving the policy outcomes set by the state. Through examining changes in policy, law and state intervention, we can see how the role of the state has changed in Ireland in terms of responding to homelessness. For this reason, the data analysis presented in this thesis has been developed and interpreted through the lens of social policy. As an academic piece of work, the dominant focus here is on the contribution this thesis can make to the field of homelessness research. In addition, the potential use of these research findings for service provision and policy making have been addressed throughout the empirical chapters.

Homelessness does not occur in an isolated bubble, it is interconnected with multiple aspects of society including, but not limited to, the housing market, health, the welfare state, poverty, social exclusion, policing, healthcare, social care, education, communities, public spaces and political ideology (Burrows et al., 1997). Homelessness is, as discussed in the literature review a multi-faceted experience which is the result of both individual and structural factors (Somerville, 2013). While individual factors are important in terms of experiencing homelessness, the solutions to homelessness lie within the control of the state, not the individual (Allen et al., 2020; Fitzpatrick & Davies, 2021). Housing and supports that help people to overcome their personal challenges are beyond the power of the individual to create. On an organisational level, despite significant investment in non-profit organisations by both individuals through charitable donations and the state through public tenders for

service provision, homeless organisations have been unable to significantly reduce the number of people who experience homelessness. Reducing or ending homelessness can only be done effectively by the state through legislative and policy action, it has not nor can be achieved though individual acts of charity (O'Sullivan, 2020; Parsell, 2018, 2019; Parsell & Watts, 2017). Policy action to reduce or end homelessness includes the provision of housing to those who are unable to provide it for themselves, this topic is currently the subject of both national and international debate in terms of the legal right to housing (Fitzpatrick & Davies, 2021; Hogan & Keyes, 2021). Relevant policy action while there are still people in EA can greatly change the experience of staying in that accommodation through improving service standards (Hearne et al., 2017) and approaches (Horsell, 2017).

Drawing on ideas from the field of social policy analysis allows the research presented in this thesis to be placed within the wider context of the issue of homelessness in Ireland; while representing the individual transitions into, through and out EA experienced by the research population. This chapter is intended to contextualise the analysis of homelessness among single adults in Dublin which is presented in later chapters. It does so by outlining the law, policy and service provision factors which shaped these trends. Trends in funding of homeless services and social housing are also discussed. It is within the context of these trends in which EA usage is examined in this thesis. The data analysed in the empirical chapters of this thesis span the years 2016-2018. In order to provide a broader context to the trends examined in this chapter, it includes the preceding and succeeding years. This chapter shows how overlapping structural factors and policy decisions influence issues such as low social housing production, increasing rental costs and stagnant household income, which have all coincided with the growing homelessness crisis.

This chapter is divided into six sections, first the history of homelessness in Ireland will be outlined. This is followed by a summary of current law and the development of national policy in this area in recent decades. The third section will discuss recent trends in homelessness including public spending on homeless services and social housing production. Homeless trends and regional policy for Dublin will be then presented. Following this, the fifth section will discuss the relationship between rising EA use, policy and other structural drivers. Finally, the conclusions to this chapter will

use the aspects of homelessness discussed here to contextualise the remainder of the thesis.

Historical Context

The issue of how poor and homeless people should be treated by society and the state has, for a long time, been a politicised and contested issue in Ireland and other Western countries. Furthermore, strategies for addressing the problems of these groups have been framed by conceptualisation of the nature and causes of their challenges which have changed over time and space (O'Sullivan, 2020).

Prior to the emergence of the concept of homelessness, we see the use of terms such as vagrant or beggar. The belief for many years was that individuals who were considered vagrant or beggared were themselves problematic to the point of criminality (Maeseele et al., 2014). The laws, policies and strategies introduced over the past two centuries particularly have focused on 'fixing' the vagrant individual through enforced engagement with institutions designed to 'reform' them (Ocobock, 2008).

The first such institution built in Ireland was the Dublin House of Industry. Built in 1774 this institution was originally intended to ensure 'sturdy beggars' worked rather than continued panhandling in Dublin City. Rather than this house of industry becoming the intended bridge to respectable employment for 'sturdy beggars', it instead filled with the aged, the infirm and the sick (Woods & Walsh, 2018).

The popularity of houses of industry (also workhouses and poor houses) only increased among the ruling class in Britain and Ireland at the time. In 1838, the Poor Law (Ireland) Act was passed by the UK parliament. At this time, Ireland was part of the UK but often subject to separate legislation from England, Scotland and Wales, particularly in relation to social policy. Thus the 'old Poor Law' which applied to England and Wales was never extended to Ireland. However, when an Irish version of the reformed or 'New' English and Welsh Poor Law was finally introduced in 1834, it strongly reflected same ideals of laissez-faire economics which had shaped the latter (Burke, 1987). Its designers believed that the individual beggar must be reformed into an obedient, self-reliant labourer through the workhouse system (Thomas, 2017).

When Ireland seceded from the UK in 1922 and became first a 'Free State' and later a republic in 1946, the poor laws were widely criticised by nationalist politicians, but they were changed in name more than in intent or execution after independence. The Local Government Acts, 1923 and 1925, saw the workhouses renamed as 'county homes', a change in a name and in management rather than in function (Powell, 2017). In the early days of the Irish Free State reports regarding the poor laws and the workhouses/county hospitals/country homes were commissioned by the state. These reports clearly demonstrate that even for the time these homes did not meet expected standards (Ireland, 1927; Eason, 1928).

These county homes continued to operate into the 1990's and accommodated homeless people, referred to as 'casuals', in designated wards. The standards in these county homes continued to be extremely low with some people being locked into their rooms at night while having no means to call for help when they needed it (O'Sullivan, 2020).

Up until the 1970's, non-profit involvement in homeless services was not part of the public discourse. Shelters were provided by the Catholic charity the St Vincent de Paul in urban areas (Harvey, 2008) and in Dublin non-residential supports were available through organisations such as the Mendicity Institution (see: Walsh & Woods, 2018). This changed radically when the first Irish Simon Community opened in Dublin in 1969. This was originally a British non-profit organisation and the establishment of a branch in Ireland was driven primarily by young adults who wished to see the development of a more just society (Harvey, 2008). The first shelter run by Simon Community came into being through soup run workers bringing people who were in need of shelter back to their headquarters. By the end of 1969 Simon Community was running their first residential house (Coleman, 1990). Galway Social Service Council (now COPE Galway) followed in the 1970's (COPE, 2021) along with Peter McVerry Trust (2021) and Focus Ireland (2021) in the 1980's. By the late 1990's, 71 services were operating in the Eastern region (Homeless Agency, 2001). New homeless services have continued to be established, both Novas (2021) and DePaul (2021) were established in 2002. One of the most visible and vocal non-profits (O'Sullivan, 2020), Inner City Helping Homeless (2021) started in 2013. In 2015 a total of 75 service providers which received state funding were operating nationally (Mazars, 2015).

Thus, over the course of the century since Irish independence, the policy and service framework for accommodating people who are unable to provide accommodation for themselves has not changed in some fundamental ways. The institutionalisation of people who experience homelessness remains in the emergency accommodation system, particularly in urban areas. This system today relies on hostel style accommodation (generally in dormitories or single rooms in an institutional building), hotels and B&B's or congregate housing. There has yet to be any evidence internationally that this temporary accommodation style system benefits those who experience homelessness beyond the basic provision of physical shelter (O'Sullivan, 2020; Parsell, 2018), indeed some evidence suggests that the shelter system prolongs the experience of homelessness (Gerstel et al., 1996). Unlike in the reports from the early 20th century, today we have evidence of the experience of living in EA from people who have lived through it. This experience has been reported as threatening, overwhelming and stressful (McMordie, 2020).

The institutionalisation of individuals has changed over time. In the past, the workhouses and county homes were places of control and punishment (O'Sullivan & O'Donnell, 2007). The modern shelter system is at best a supportive environment while homeless and at worst is 'therapeutic incarceration' (Gerstel et al., 1996). Therapeutic incarceration occurs when homeless service providers delay access to housing based on the service users engagement or completing required activities (e.g. job readiness classes) so they can become 'housing ready' (Gerstel et al., 1996). The belief that the organisations who operate this accommodation 'help people to help themselves' (Woods & Walsh, 2018) still echoes the beliefs of the past. This model assumes that the policy and bureaucratic system in which homeless services are operating are created and maintained by professional, objectives driven by policy makers (Gerstel et al., 1996) and that the individual, rather than the system is what needs 'fixing' (O'Sullivan, 2020).

Historically, county homes were primarily operated from buildings which had previously been workhouses. While they were funded and controlled by local authorities, the day to day operations were largely carried out by members of Catholic religious orders employed by local authorities to do so (Government of Ireland, 2021, p 36). While religious influence, particularly in terms of moral control, has reduced significantly, religion has had an impact on the development of modern homeless

services. Of the large non-profits in Ireland which provide services for people in homelessness, Focus Ireland (2021), St Vincent DePaul (2021) and Peter McVerry Trust (2021) were started by members of the Catholic Church. Simon Community (2021) is the only large non-profit not started by a member of a religious order or religious organisation.

Contemporary Legislation and Policy

Legislation

The first legislative acknowledgement in the Republic of Ireland of people being unable to provide care for themselves in their own home is found in the Health Act 1953. This Act stipulates that the State has statutory responsibility to provide shelter for those who cannot provided it for themselves, section 54(2) states that, "*A person who is unable to provide shelter and maintenance for himself or his dependants shall, for the purposes of this section, be eligible for institutional assistance*". This 'entitlement' meant people who could not provide accommodation for themselves could be housed by their local authority in a county home (O'Sullivan, 2020).

Although the Health Act 1953 acknowledges that individuals may be unable to provide accommodation through their own means, it does not explicitly name this as homelessness. The legal definition of homelessness was introduced by the Housing Act 1988 which states:

> A person shall be regarded by a housing authority as being homeless for the purposes of this Act if—
>
> (a) there is no accommodation available which, in the opinion of the authority, he, together with any other person who normally resides with him or who might reasonably be expected to reside with him, can reasonably occupy or remain in occupation of, or
>
> (b) he is living in a hospital, county home, night shelter or other such institution, and is so living because he has no accommodation of the kind referred to in paragraph (a),
>
> and he is, in the opinion of the authority, unable to provide accommodation from his own resources.

This Act therefore legally underpins the Irish State's response to homelessness. Not only does it provide the legal definition it also empowers local authorities (in their capacity as housing authorities for the purposes of this Act) to provide or fund the provision of accommodation for those who become homeless within their region (Kenna, 2011). In Section 10 of this Act, local authorities are empowered, but not obligated, to provide funding for accommodation and support to individuals who fall within this definition of homelessness, in accordance with current policies and strategies provided by the relevant minister. The words homeless and homelessness only became popularised in the early 1980's (Gerstel et al., 1996) so from an international perspective, Ireland was relatively forward thinking in its introduction of a legal definition of these terms within the decade.

The third key piece of legislation relevant to homelessness in Ireland is the Housing (Miscellaneous Provisions) Act 2009 which requires all local authorities to adopt a homeless strategy within eight months of this Act being introduced. It also requires local authorities to establish a homelessness consultative forum and appoint a management group. The provision of health care to those who are homeless and the involvement of the health services in supporting people in homelessness is specifically acknowledged in this Act and the Health Service Executive (HSE) which manages publicly funded health services in Ireland is assigned responsibility for providing health services to homeless people (Kenna, 2011).

Legislation relating to the care of children has also had an impact on those who experience homelessness. The Child Care Act (1991) assigns the State with special responsibility for protecting the welfare of children (defined as people aged 18 and under). The Child Care (Amendment) Act 2015 established a dedicated state agency (called Tusla) with responsibility for child welfare and family support for the first time to provide aftercare support to young people leaving state care. This aftercare service appears to have had a positive impact on reducing the number of young people who enter homelessness directly from state care (Bairéad & Norris, 2020).

The right to housing has been much discussed and debated in the Irish context, particularly in terms of a proposed constitutional amendment (McCurry, 2021). Given the way in which the Irish legal system works, it is impossible to know for sure what impact such an amendment would have on the reality of housing and homelessness

in Ireland. It is the interpretation which may be applied in future court cases that will ultimately determine the impact which such a law would have in reality.

The impact of case law has also been felt in terms of homelessness. The lack of a right to housing was, for example, addressed in EBS v Kenehan (2017), wherein Justice Barret stated:

> There is no express right to housing in Irish law; but that is not to say that a qualified, as yet unrecognised, un-enumerated right pertaining to housing may not at some point be recognised by the courts as existing in and under the Constitution (*EBS V Kenehan*, 2017).

While this leaves the possibility that an unenumerated right to housing may be established in future cases, as yet no effort has been successful in doing do. In saying this, some cases found that specific individuals (plaintiffs) have had the right to shelter or assistance in relation to accommodation. Such rights have been very clearly classified as a case by case basis and have not been applied generally, something the courts have taken great pains to clarify (Casey, 2019).

The right of local authorities to apply their interpretation of the definition of homelessness under the Housing Act (1988) and how they apply the powers awarded to the under said Act has also been upheld by the court's multiple times. Each of three cases discussed by Casey in his 2019 article, 'Courts, Public Interest Litigation and Homelessness: A Commentary on Recent Case Law', took place in 2017 and involved children. These cases demonstrate that despite the State's acknowledgement of people who experience homelessness and their special responsibilities for children under the age of 18, multiple Irish judges have established that court's view the obligation to act upon the special powers and responsibilities in these cases as limited and open to interpretation by state bodies (Casey, 2019). In one of these cases (*Tee v Wicklow County Council, 2017)* "the Court emphasised it had no function to perform in cases involving the allocation of resources by public bodies facing competing claims on those resources" (Casey, 2019, p 5). What these cases demonstrate is that while Irish law may initially be perceived as clear in relation to the state's definition and responsibility for those who experience homelessness, in practice the law is not always protective in practice, even when children are involved.

So long as the right to housing remains unrecognised by Irish law, the provision of social housing will remain in the realm of government policy. Social policy is addressed in Article 45 of the Irish Constitution (Bunreacht na hÉireann) which states that:

> The principles of social policy set forth in this Article are intended for the general guidance of the Oireachtas. The application of those principles in the making of laws shall be the care of the Oireachtas exclusively, and shall not be cognisable by any Court under any of the provisions of this Constitution.

Notably, this article establishes social policy principles to guide parliament (the Oireachtas) and does not establish a legal right to any social policy, it also places social policy implementation outside of the purview of the courts so long as the practice does not conflict with other law.

National Policy

The last decade has seen very extensive policy action on homelessness, in response to the marked increase in levels of homelessness detailed below and also in response to significant media attention in these developments and public concerns.

In 2000 the Government published *Homelessness – An Integrated Strategy* (Government of Ireland, 2000) which outlined the first cohesive national approach to tackling adult homelessness in Ireland. The key objectives of this strategy were "to ensure adequate emergency responses for those who become homelessness" and "to ensure reintegration to the family and/or community of those who have been homeless" (Government of Ireland, 2000, p4).

In 2008, a follow-up strategy entitled: *The Way Home: Homelessness – An Integrated Strategy,* was published, outlining the three core objectives of "eliminating long-term occupation of emergency homeless facilities; eliminating the need to sleep rough; and preventing the occurrence of homelessness as far as possible" (Government of Ireland, 2008, p5).

Rebuilding Ireland was published in 2016, this national policy statement and action plan contains five pillars, the first is to address homelessness. This pillar states its primary aim is to "provide early solutions to address the unacceptable level of families in emergency accommodation; deliver inter-agency supports for people who are

currently homeless, with a particular emphasis on minimising the incidence of rough sleeping, and enhance State supports to keep people in their own homes" (Government of Ireland, 2016: 13). To achieve this aim, the policy statement proposes that an inter-agency approach to addressing homelessness will be adopted by providing supports including, health services and housing provision. The specific policy actions intended to address homelessness are:

- providing a higher level of Housing Assistance Payment (HAP) for people who are homeless under the Homeless Housing Assistance Payment (HHAP) tenancy scheme.
- rolling out the Housing First initiative to address homelessness among single people nationally (see below).
- introducing extra emergency beds seasonally in the Dublin Region under the Cold Weather Initiative.
- Increasing the budget for homeless health services; and prioritising intervention and support that allows people to remain in their homes (Government of Ireland, 2016).

In 2019, the DRHE published the National Quality Standards for Homeless Services in Ireland. This policy was devised on behalf of the Department of Housing, Local Government and Heritage (DoHLGH) with the aim of improving the standard of services provided in Section 10 funded services. The aims of this policy are to:
- Promote safe and effective service provision to persons experiencing homelessness.
- Support the objectives of National Homelessness Policy, i.e. enabling people to move into and sustain housing with appropriate levels of support;
- Establish consistency in how persons experiencing homelessness are responded to across different regions and models of service delivery.
With the key objectives for service providers of:
- Where possible, preventing homelessness
- Moving people who use homeless services out of emergency provision as quickly as possible

- Supporting persons, who were formerly homeless to sustain housing with levels of support appropriate to their needs (DoHLGH and DRHE, 2019:4).

The government's latest housing strategy entitled - *Housing for All* was published in September 2021 (Government of Ireland, 2021a). This strategy is the most ambitious to date aiming to eradicate homelessness in Ireland by 2030. This strategy focuses primarily on additional social housing provision increasing the Housing First target and aiming to introduce 9,000 new social housing units per annum. The strategy also identifies the importance of providing support for homeless people with high and complex support needs. It aims to provide these supports through the HSE and other support services. As part of this strategy, the government plans to establish and inter-agency National Homeless Action Committee which will aim to deliver more cohesive services to ensure policy objectives are achieved.

National Trends in Homelessness, Public Spending and Social Housing

National Trends in Homelessness

Following World War II and the introduction of comprehensive welfare states across many high income countries, it was assumed that homelessness would naturally cease to be a problem in the modern world (O'Sullivan, 2020). Not only has this proven untrue, in the Irish context the available evidence indicates that homelessness has become more prevalent and complex, particularly over the past decade. Comprehensive older data (pre-2014) on the number of people experiencing homelessness in Ireland is not readily available. One survey, carried out by Dublin Simon Community between September 1981 and June 1983 included just 98 people (Coleman, 1990). Statistical analysis for a hostel in Galway, carried out by Eoin O'Sullivan found that 1,000 individuals used the shelter between 1983 and 1989 (O'Sullivan, 1993)

Since April 2014, the housing ministry has begun publishing official monthly numbers of individuals who use EA broken down by household type, accommodation type, age and region. These data have been compiled from the PASS database (from which the data employed in this thesis are also generated) using the same standardised

methodology since July 2014 (therefore earlier published data are not fully comparable).

The data examined in this thesis have been gathered during a period of radical increase in homelessness in the Republic of Ireland, which consequently has become a pressing concern for policy makers, service providers and social activists (O'Sullivan, 2020). During the time period included in this thesis (2016 – 2018) EA occupancy increased from 3,258 to 9,753 or by 199% (DoHLGH, various years). Although the greatest proportionate increase in homelessness has occurred in rural areas, in absolute terms, the vast majority of the homeless population is concentrated in Dublin (by 219% from 2,177 to 6,945). Figure 1.1 shows this increase within the context of a broader time period (2014-2021) showing the upward trend of EA use is not limited to the years considered in this thesis. As shown, increasing homelessness among families with children is the primary driver of this growth in homelessness, because rates of family homelessness in Ireland were very low until recent years, but single adults still account around half of the homeless population in Dublin during the time period considered here (DoHLGH, various years).

Figure 1.1 Increase in EA Using Homeless Population in Ireland, 2014-2021
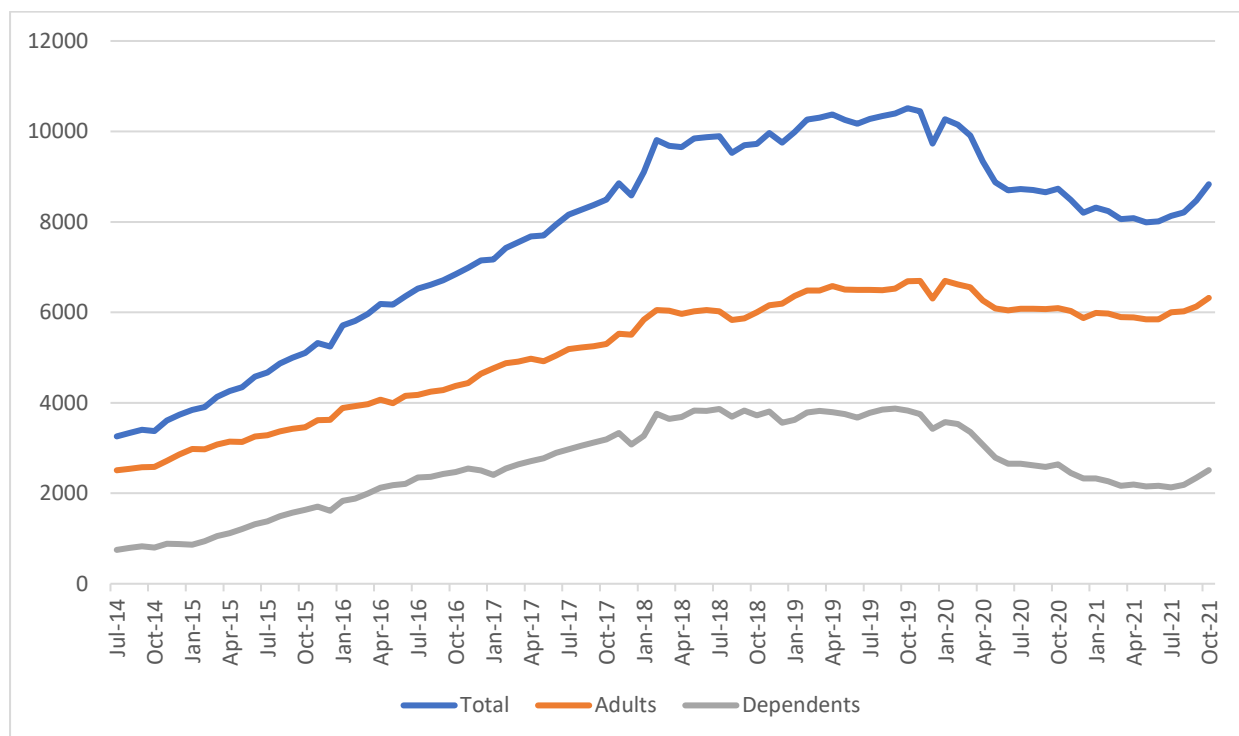
When planning to rehouse EA users, a number of issues should be considered including the number of households that need housing and the size of these households. As shown in Figure 1.2, in terms of household units, the number of single adult households is far greater than the number of family households. As some single adults are in relationships, the data have been adjusted based on the number who reported their relationship on PASS (10% of research population) to estimate the number of units in demand. This is also reflected in the demand for social housing among the general population in Ireland in the period prior to this report, though in lower levels. In 2013, single adults made up 43% of social housing demand in Ireland, this percentage had risen to 52% in 2020 (Housing Agency various years).

Figure 1.2 EA Using Population by Household Type 2016-20212[1,2]

1. Data Source:

https://www.gov.ie/en/collection/80ea8homelessnessdata/?referrer=http://www.housing.gov.ie/housing/homelessness/other/homelessness-data
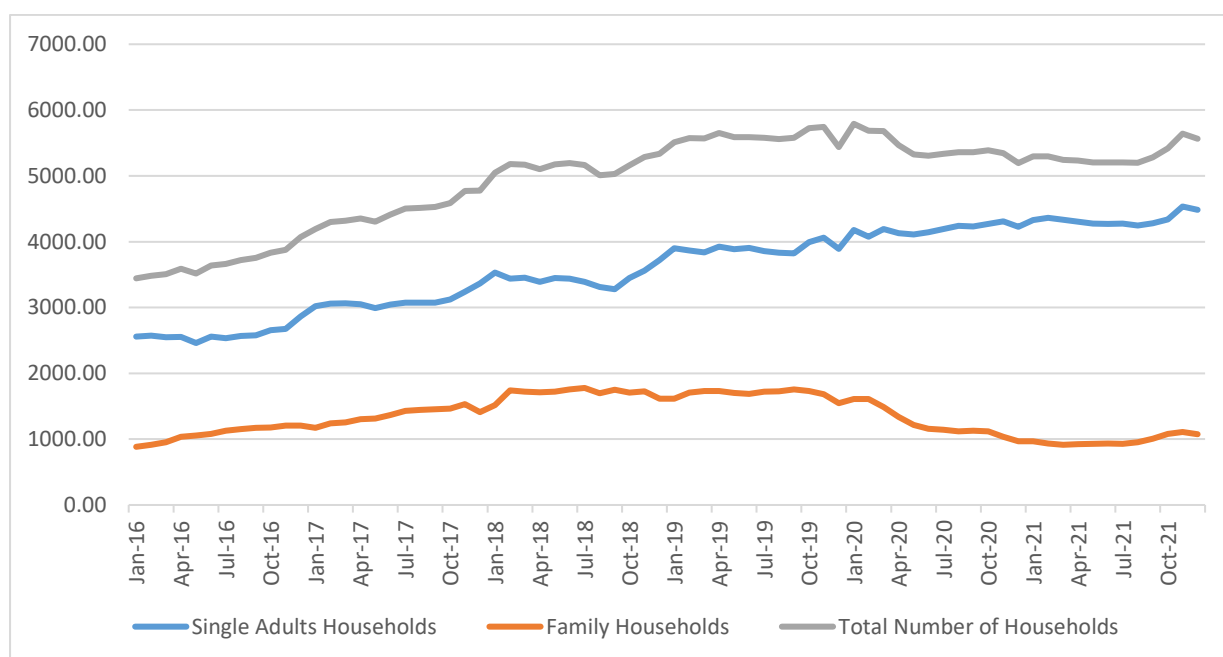
2. Note: Data are based on availability of information in monthly reports. Single adult households adjusted based on estimated number of couples from research population.

Notably although emergency accommodation for homeless people in Ireland is almost entirely publicly funded, very little of it is publicly delivered – rather it is delivered by non-profit organisations and commercial providers contracted by the DRHE (O'Sullivan & Musafiri, 2018). Each of these sectors deliver around half of EA in Dublin,

but the principal type of households they accommodate and the type of accommodation they provide varies. Most accommodation for single and two-adult homeless households is provided by the non-profit sector – primarily in shelter-type settings (called homeless hostels in Ireland). Whereas families for children are accommodated either in family hubs which are run by both commercial providers and non-profit organisations or in hotel, guesthouses and bed and breakfast accommodation provided by commercial providers (O'Sullivan, 2020).

Public Spending on Homeless Services and Emergency Accommodation

Spending on EA in particular has increased significantly in recent years. In 2014, the state spent €66,009,164.35 on homeless services (including prevention, day services and accommodation), 54% (€35,778,281.58) of which was spent on EA. By 2018, this spending had increased by 174% to €180,837,905.00 of which 81% (€146,875,300.00) was spent on EA (DoHLGH, various years) (see Figure 1.3). Over this time period, the increase in spending has been heavily concentrated on EA provision which has seen a funding increase of 311%. Comparatively spending on all other services during this same period has increased by just 12%.

Figure 1.3 Public Spending on Homeless Services 2014-2018 [1]

1. Data Source:
https://www.gov.ie/en/collection/80ea8homelessnessdata/?referrer=http://www.housing.gov.ie/housing/homelessness/other/homelessness-data
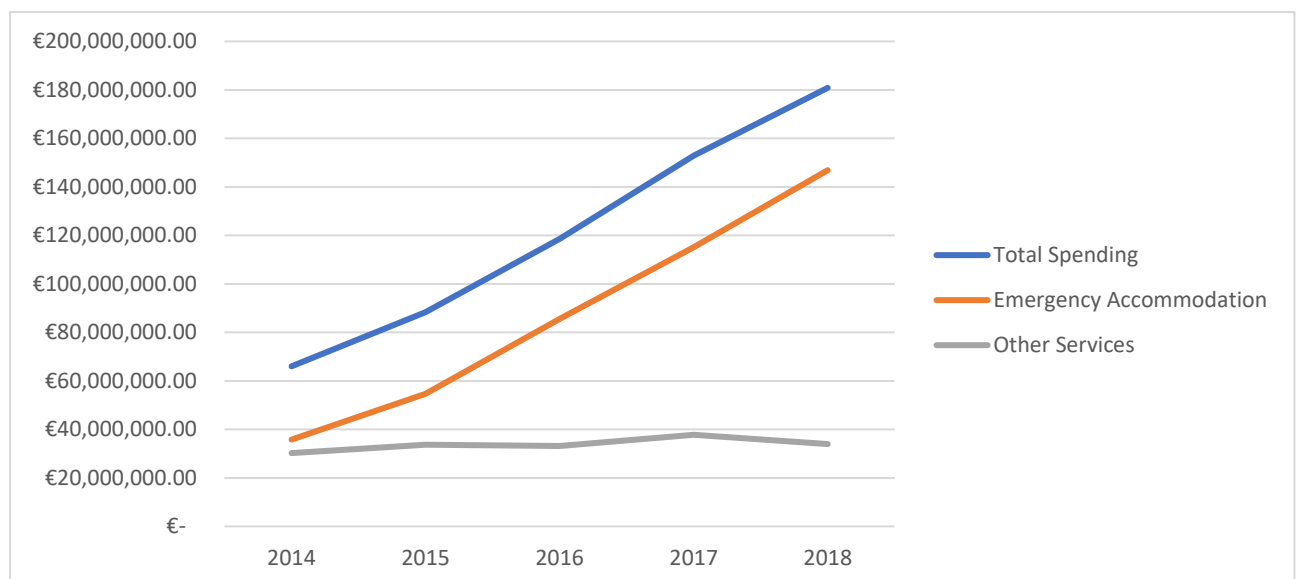
Ireland's social housing sector is medium sized by western European standards (albeit not by the standards of most other developed countries). According to the 2016 census 8.7 per cent of households lived in local authority provided social housing and a further 1 per cent lived in social housing provided by approved housing bodies (as housing associations are called in Ireland) (Drudy, 2016). Government funding for new social housing output was cut radically following the global financial crisis and although output has increased again in recent years it has failed to keep pace with growth in population and housing need (Byrne & Norris, 2018). Across the period considered here, tenancies in social housing units owned by authorities and approved housing bodies in Ireland; and dwellings leased by both organisations for reletting as social housing increased by 7% from 175,791 in 2016 to 188,632 in 2018 (DoHLGH, various years; DoSP, various years). The number of people on the waiting list for social housing decreased between 2016 and 2018 by 22% (or from 91,600 to 71,858). The average yearly output of new social housing during this time was 4,793 units per annum (DoHLGH various years). Social housing tenants in Ireland enjoy strong security of tenure and affordable rents which are linked to income (The Housing Agency, 2022). Tenancies may only be terminated in very limited circumstances, where:

> there has been a serious or repeated breach of a condition of the tenancy agreement, for example, anti-social behaviour or non-payment of rent; the dwelling has been abandoned by the tenant and is occupied by a squatter; the tenant has died and the dwelling is occupied by someone who is not entitled to succeed to the tenancy (Citizens Information, 2022).

In addition to social housing, housing allowances are available for those on lower incomes in Ireland. There are three forms of housing allowances provided by the state, the Housing Assistance Payment (HAP), the Rental Accommodation Scheme (RAS) and Rent Supplement (RS). HAP is a Local Authority housing allowance introduced in 2014 in order to elevate pressure on the social housing waiting list. Recipients of this allowance source their own accommodation in the private market which is then paid for by their local authority. In order to receive HAP, a household must qualify for social housing (a means tested assessment) and be on a local authority housing list (Citizens

Information, 2021a). Initially, taking a HAP tenancy would remove applicants from the social housing waiting list (Hearne & Murphy, 2018). This has since been adjusted and HAP recipients may apply to be placed on a transfer list (Citizens Information, 2021a) which allows them to transfer to a social housing tenancy should one become available. The tenant in HAP tenancies pays a weekly contribution towards their rent to their local authority, this contribution is calculated as a percentage of income. There are also additional HAP supports for people who experience homelessness through the DRHE and Cork City Council. These include discretionary rent limits and assistance in finding suitable properties (Citizens Information, 2021a). HAP tenancies are two years long, though they may be renewed (hap.ie, 2021). HAP tenancies may be ended by the landlord so long as the reason for eviction falls under one of seven legitimate grounds for eviction (the tenant is in breach of their obligations; the tenant has failed to pay rent; the property no longer fits the tenants needs; the landlord requires the property for personal or family use; the landlord wants to sell the property; significant refurbishment of the property; and the use of the property is changing) (Residential Tenancies Board, 2022b). A tenant may leave a property should they wish through providing their landlord with a written notice of their intent to vacate the property, the required notice period may change depending on the reason for leaving (Residential Tenancies Board, 2022a). HAP tenancies may also be ended by the local authority who provides the rent on behalf of the tenant, the reasons they may do so are: if the tenant does not give the local authority the information they require; the tenant does not pay the weekly rent contribution; if the tenant engages in anti-social behaviour; if the tenant moves to a new home within two years of signing the agreement and seek HAP support for the new home, without the permission of the local authority (hap.ie, 2021). Under policy objectives, HAP is intended to replace RAS and RA over time, however one criticism of the scheme is that the payment limits continuously fall below average market rental rates (Watson & Corrigan, 2019).

RAS is a scheme under which local authorities source and rent accommodation on behalf of the tenant. Tenancies last for a minimum of four years and like HAP rent is paid directly by the local authority to the landlord. Unlike HAP however, in a RAS tenancy if the landlord leaves the agreement the local authority must find new accommodation for the tenant. RAS was introduced in response to rising demand for

social housing as a result of the global financial crash in 2008 when local authority capacity to accommodate tenants had suffered significantly (Hearne et al., 2017).

RS is a housing support payment funded by the Department of Social Protection (DoSP). Unlike HAP and RAS, RS is paid directly to the individual to subsidise their rent (in a private rental property). The limitations on eligibility are also more stringent than HAP, because RS is primarily targeted at those who have had a significant reduction in income due to a change in circumstance (Citizens Information, 2021c).

During this period, housing allowance supported tenancies (HAP; RAS; RA) increased by 8% from 83,204 in 2016 tenancies to 90,047 in 2018. Figure 1.4 below demonstrates that in large part declining waiting lists for access to social housing reflects increasing reliance on state subsidised private rented housing to accommodate low-income households. Since 2016, HAP tenancies have increased by 163%, from 16,493 tenancies to 43,443 tenancies in 2018. While this is a significant increase, there was a parallel decrease in tenancies supported by Rent Supplement (RS) during the same period The number of tenancies supported by RS dropped by 49% from 44,521 in 2016 to 22,869 in 2018.

Meanwhile, the cost of private sector rent in the Dublin region increased by an average of 43% during the same period (Lyons, 2015, 2019). Income growth has slowed and average incomes increased by just 8% between 2014 and 2018 (CSO, various years). Due to the combination of these factors, the key driver of rising homelessness has been households losing their private rented tenancies while being unable to secure alternative accommodation in the social housing sector (Hoey & Sheridan, 2016).

Figure 1.4 Social Housing Tenants and Housing Allowance Recipients (N) 2000-2018[1]
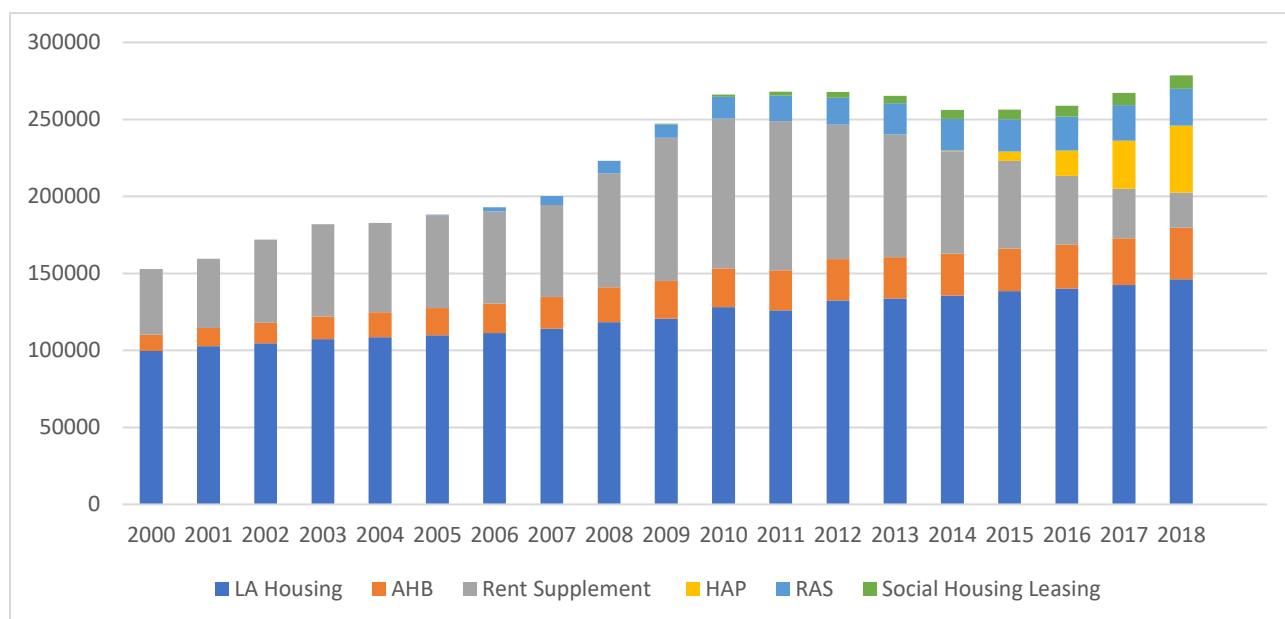
1. Data Source: DoHLGH (various years) Annual Housing Statistics Bulletin and DoSP (various years) Social Welfare Statistics.

Supports After Leaving Emergency Accommodation

Support to Live Independently Scheme (SLÍ)

In 2010, the Homeless Agency launched *Pathway to Home*, a service restructuring strategy for homeless services in the Dublin region. As part of this strategy, the Support to Live Independently Scheme (SLÍ) was introduced. This scheme is funded by the DRHE and is delivered by non-profit homeless service providers (Dublin Simon Community, 2021; Peter McVerry Trust, 2021). The objective of SLÍ is to help people reintegrate into their community and to be able to access services and amenities in their local area (Dublin Simon Community, 2021).

In order to access this scheme, tenants are referred by their local authority when their tenancy starts (Dublin Simon Community, 2021). Those who enter a Homeless HAP tenancy are automatically eligible for this scheme (DRHE, 2021). SLÍ provides visiting support for those entering accommodation from EA, this visiting support is based on one hour a week for up to six months (TSA Consultancy, 2014).

SLÍ does not offer support for people with high or complex support needs (Manning et al., 2018) and Housing First was introduced in the Dublin region in 2011 to fill this gap. The Housing First pilot programme, was provided through cooperation between the DRHE and non-profit service providers (Manning et al., 2018).

Currently, two versions of Housing First are operating in Europe. The first, developed in the 1990's by Tsemberis and colleagues as 'Pathways Supported Housing' presented the idea of housing people first and then treating their additional needs rather than the traditional reversed approach (Tsemberis, 1999). Participation in this form of Housing First has resulted in more stable housing tenancies with the added benefit of some better health outcomes for participants (Baxter et al., 2019) than the staircase/treatment first model in hostel style accommodation. The success of Housing First in different jurisdictions has been well documented in international literature on homelessness (Baxter et al., 2019; Volker Busch-Geertsema, 2013; Manning et al., 2018; Padgett et al., 2016; Padgett et al., 2015; Pleace, 2012; Pleace & Bretherton, 2013; Tsemberis et al., 2004). However, Housing First in Ireland is aimed at a minority of those who experience homelessness in the Irish context (Government of Ireland, 2018b).

The second form of Housing First is the Finnish model which works off the premise of housing everyone who becomes homeless and then offering further supports if they are needed (Allen et al., 2020). The Finnish Housing First model marks a significant shift away from the 'staircase' model the country previously employed (Tainio & Fredriksson, 2009). The shift towards Housing First has been done in stages, one of the most significant changes to the Finnish system has been the removal of hostel style accommodation in favour of single occupancy accommodation within a supported housing unit (Pleace et al., 2015). For those who use this new style of accommodation, moving on to stable, permanent accommodation is the goal (Shinn & Khadduri, 2020).

Housing First in Ireland is based on the 'Pathways to Housing' approach first developed in New York in 1992 by Dr Sam Tsemberis and colleagues and operates on five key principles; housing, choice, recovery, support and community (Pathways Housing First, 2021). This approach was a significant shift away from the traditional staircase model. Under the staircase model accessing housing is conditional upon engaging in treatment programmes or displaying specific behaviours (Sahlin, 2005).

In Ireland, *The Housing First Implementation Plan* 2018-2021, published in 2018, provides a specific strategy for providing housing as the first intervention in cases of homelessness. *The Housing First National Implementation Plan* was preceded by a

pilot programme, launched in Dublin in 2011. This pilot was provided through cooperation between the DRHE and non-profit service providers (Manning et al., 2018).

Housing First has developed internationally as a strategy to assist individuals who engage in rough sleeping and experience addiction issues. The guiding principle is that providing secure housing from which individuals can access other support services will provide them with the best opportunity to exit homelessness. The Irish implementation plan reflects the expansion of the group for which housing is provided first, including those who have experienced long-term homelessness and individuals with mental health difficulties. It aims to provide 663 Housing First tenancies nationally by the end of 2021 (Government of Ireland, 2018).

Although Housing First has been shown multiple times in multiple jurisdictions to work well for the group it has been developed for, that group represented 22% of the respondents to the survey collected for the national implementation plan and just 12% of the adult EA residents at the time (Government of Ireland, 2018). *The Housing First National Implementation* plan is funded using a number of government sources and is delivered by both local authorities and non-profit organisations, depending on the region. Local authorities provide some funding through Section 10 (Housing Act, 1988) and the Housing Assistance Payment (HAP). The housing ministry and the Health Service Executive also contribute to this scheme (Government of Ireland, 2018, p 32).

Homeless Trends and Policies in Dublin

Homelessness Policy for the Dublin Region

In 1996 the four local authorities responsible for the Dublin region (Dublin City Council, South Dublin County Council, Fingal County Council and Dún Laoghaire Rathdown County Council) established the Homeless Initiative, which was tasked with building relationships between voluntary organisations and public agencies to create a workable framework to address homelessness in the Dublin region. This initiative was followed by the establishment of the Homeless Agency in 2001, which became the Dublin Region Homeless Executive (DRHE) in 2011 (O'Malley & Hayden, 2017). The DRHE is the lead statutory authority for homeless service funding and management in the Dublin region. It created PASS which is now used nationally for bed allocations in emergency accommodation. The DRHE currently uses this operating system for

emergency accommodation bed allocation. In addition to this, PASS data are used by the local authorities, the DoHLGH and stakeholders such as homeless service providers to inform policies, planning and service provision in the region. DRHE funding for emergency accommodation is provided under section 10 of the Housing Act 1988.

Since 2001, this agency has produced policies and strategies specifically to address homelessness in the Dublin region. The first strategy produced by the Homeless Agency was *Shaping the Future*: *An action plan on homelessness in Dublin 2001-2003* (Homeless Agency, 2001). This strategy presented three key objectives:

- to address the current gaps and deficiencies in services and accommodation, including long-term housing, for people who are homeless in Dublin.
- to ensure that people who are homeless have access to the range of services necessary to reduce the length of time they spend homeless to an agreed minimum and that they are assisted to sustainable long-term housing and independence.
- to ensure that mainstream policies and services are focused on preventing people from becoming homeless (Homeless Agency, 2001, p11).

Shaping the Future outlined the historical context of service provision and policies in the region. It addressed key issues that needed to be addressed and overcome. Finally, it established the methods by which successes or achievements regarding homelessness would be measured in the region.

Several additional strategic plans have been published for the Dublin region since *Shaping the Future.* These have focused on different strategic priorities, for instance, the strategy statement *Making it Home: an action plan on Homelessness in Dublin 2004 – 2006,* was more focused on prevention, reduction and service/policy delivery. The strategic aims were:

- reduce the number of households who become homeless
- increase housing options for single people who are homeless
- ensure that services are effective in addressing the needs of people who become homeless

- ensure that each local area develops effective responses to homelessness
- improve information available on homelessness and responses to it
- provide effective leadership and coordination in the implementation of the plan (Homeless Agency, 2004 p 8).

The prevention and service provision theme continued in the following strategy, *A Key to the Door: The Homeless Agency Partnership Action Plan on Homelessness in Dublin 2007–2010*, which aimed to:

- Prevent people from becoming homeless
- Provide effective services in each local area to address the accommodation, housing, health and other relevant needs of people who are homeless in that area
- Provide sufficient long-term housing, with appropriate supports as required, for people who are homeless, especially single person households (Housing Agency, 2007, p 25).

Sustaining Dublin's Pathway to Home: The Homeless Action Plan Framework for Dublin, 2014 to 2016 focused on housing, more tailored services and the need to address rough sleeping in the region:

- AIM 1: Address the unmet housing need of people experiencing homelessness through a substantial increase in the provision of housing units alongside improved access to a wider range of affordable and secure housing options with support and care as required.
- AIM 2: Stop the occurrence of an episode of homelessness by delivering comprehensive preventative support services in housing, health and welfare alongside relevant, accurate and timely housing information and advice.
- AIM 3: Ensure the delivery of effective services for homeless people that meet their identified housing, health and welfare needs and produce the sought-after, person-centred outcomes set out in Pathway to Home.

- AIM 4: Simplify and speed up an appropriate exit from emergency accommodation and rough sleeping in order to reduce the length of time people experience homeless to less than 6 consecutive months in any one episode prior to a departure to independent living.

- AIM 5: Eliminate the need for people to sleep rough through an expansion of the Housing First approach to address all aspects of habitual and long-standing rough sleeping and homelessness, including episodic and prolonged use of temporary (DRHE, 2014, p 19).

The current strategy for the region is *The Homelessness Action Plan Framework for Dublin, 2019-2021*. This strategy uses the four P's, this brings a lot of themes in previous strategies together:

- Prevention: providing early intervention to people at risk of homelessness.

- Protection: protecting people experiencing homelessness through emergency accommodation provision and targeted support.

- Progression: identifying and enabling pathways to long-term housing solutions.

- Proper Governance and Finance Oversight: ensuring that appropriate governance and accountable structures are in place for all service providers (DRHE, 2019, p 15).

The strategic aims have not changed a lot over the last twenty years in the Dublin region. Focus has shifted, particularly in terms of what is viewed as appropriate support, more emphasis on housing provision as a solution and growing concerns regarding rough sleeping in the region. Although the focus and proposed methods of delivery have changed over the years the region has stayed true to course in that it has taken an inter-agency approach and maintained a policy of prevention and appropriate service availability. As seen earlier in this chapter, these strategies have been unsuccessful in eradicating homelessness from the region as the number of people using EA has risen consistently. During this challenging time in the region in terms of homelessness, the Homeless Agency/DRHE have consistently ensured prevention services and emergency accommodation have been available (O'Sullivan, 2020).

The Dublin Joint Homeless Consultative Forum (DJHCF) and Management Group, both of which were established in accordance with the Housing (Miscellaneous Provisions) Act 2009, are responsible for taking an active part in the decision-making for strategic plans in the Dublin region. These groups include members of both voluntary organisations and public agencies that have responsibilities for service provision and provision of care to people who experience homelessness in the Dublin region.

Single Adult Users of Emergency Accommodation for Homeless People in the Dublin Region

As explained in the introduction to this thesis, the focus of the analysis presented here is on single adults in the Dublin region. This focus was selected in part because to the during the time period considered, 72% of EA use was in the Dublin region. Figure 1.5 shows the number of new presentations to emergency accommodation by single adults in the Dublin region compared to those who presented in other regions and nationally between January 2016 and December 2021. Monthly figures for 2014 and 2015 are not available as breakdown of adults based on family status did not become the practice until 2016. As can be seen in the table below, the increase in single adult EA use in the Dublin region during this period did not have as steep an incline as overall EA use nationally. The rapid increase in family homelessness has had a significant impact on EA use and the public perception of homelessness (O'Sullivan, 2020). Single adult homelessness, comparatively, has been a more consistent and persistent challenge in the Irish context. However, compared to the rest of the country, the increase in single adult EA use in Dublin has been significant. The number of EA occupants in Dublin in December 2021 was 92% higher than in January 2016. When the same two months were compared for the rest of the country single adult EA use was 50% higher.

Figure 1.5 Single Adult EA Users in the Dublin Region Compared to the Rest of Ireland, 2016-2021[1]
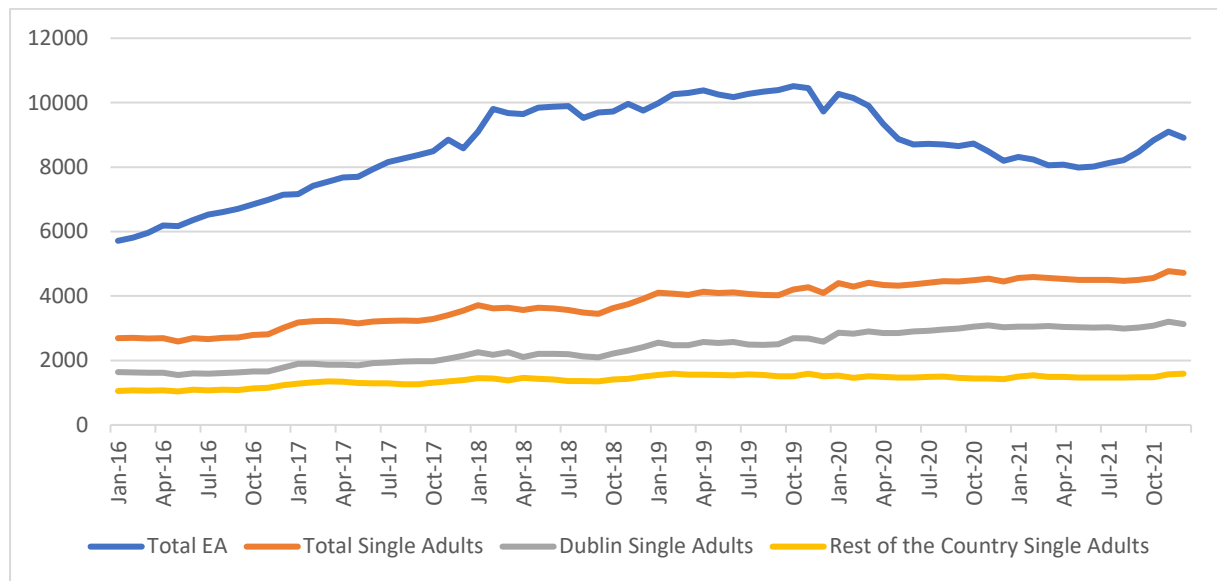
The Impact of Policy Responses and Research on the Drivers of Homelessness Rates

Ireland is not alone in facing a significant increase in homelessness, in the EU there has been an estimated 70% rise in homelessness across member states (Abbé Pierre Foundation - FEANTSA, 2021). Simultaneously, social housing across the EU has been reduced leading to increased stigma and social challenges in many member states (Scanlon et al., 2014). Ending homelessness is now a key objective of governments across European counties both individually and collectively. In 2021, all EU member states along with key agencies signed the Lisbon Declaration of the European Platform on Combatting Homelessness, which aims to end homelessness in the EU by 2030 (Council of the European Union, 2021). The notable exception in a European context is Finland who have managed to decrease homelessness through targeted, evidence-based strategies. The Finnish Housing First model, which uses single occupancy units with optional supports available, has been credited with the decrease in homelessness in recent years (Shinn & Khadduri, 2020).

One of the key challenges for Ireland in reaching the kind of decrease in homelessness Finland has achieved is access to housing. Housing exclusion in Ireland has risen in recent years, in large part due to the Global Financial Crisis (GFC) and the austerity

measure implemented following it (van Lanen, 2020). As mentioned above, the social housing stock in Ireland is in high demand. This was not always the case, prior to the 1980's, Ireland had a relatively healthy social housing stock. Between the 1940's and 19070's, social tenancies from local authorities accounted for between 16-18% of housing tenures in Ireland (Norris, 2016), around double what it is today (Drudy, 2016). Policy changes implemented in the 1980's significantly shifted the amount of housing produced by local authorities, which in turn has increased reliance on housing allowances (Norris & Byrne, 2017).

The use of housing allowances, particularly HAP to shift the pressure from the public to the private market has increased rather than decreased the issues in the housing market. The primary issue is that private rents are often unaffordable for people who qualify for housing allowances (Grotti et al., 2018). High cost of house purchasing compared to income rates increases the pressure (and competitiveness) in the private rental market as people who would have previously purchased a home are unable to do so (McGinnity et al., 2021). In addition, HAP and RS rates frequently fall below market rates leading people to 'top up' their allowance through their own means in order to be able to access accommodation (Hearne et al., 2017). For households comprised of one or two adults, finding suitable accommodation is particularly challenging as there is an undersupply of smaller housing units in the Irish market (Lyons, 2018). Finding appropriate accommodation for those who qualify for housing allowances also carries the challenge of finding a landlord willing to rent to a social tenant. While it is illegal in Ireland for a landlord to refuse a tenant based on their receiving a housing allowance, people who do receive these supports still experience discrimination in the housing market (Gusciute et al., 2020). In addition to the difficulties experienced in the private rental market, households comprised of one or two adults without children are less likely to receive a local authority house than households with children (McGinnity et al., 2021).

The significant body of national and regional policy produced in the last twenty years demonstrates that the Irish government has recognised that homelessness is an issue and have attempted to solve it. These policies have been recognised as being of a high standard, particularly in relation to the emphasis on prevention strategies (Maher & Allen, 2014). Despite this, by any common form of policy evaluation (Greve, 2017) these policies have failed to achieve their intended purpose in reducing single adult

homelessness and eliminating rough sleeping and long-term homelessness. Given the large increase in government spending, the failure in policy is not an issue of access to funding but rather how that funding has been used by the state and the organisations which provide services for homeless people. There has been particular efforts put into increasing EA capacity rather than housing capacity despite the totally lack of evidence for the effectiveness of the former and growing evidence for the latter (O'Sullivan, 2020). In terms of policy objectives, Ireland and Finland have had very similar goals in recent years. The stark difference between the two countries is that while Finland was deceasing hotel style homeless accommodation in favour of single occupancy units, Ireland was increasing hostel style EA (Allen *et al.*, 2020).

One area where strategies have been successfully implemented in recent years is family homelessness. Following the exponential increase in family homelessness from July 2014 to June 2018, the trend switched in July 2018 and has been downward sloping since (DoHLGH, various years). This reduction in family homelessness is likely due to a combination of interventions including the use of 'Own Front Door' temporary accommodation (houses/apartments occupied by a single family unit on a temporary basis), current social housing stock being predominantly family homes and case by case HAP increases. The reduction in family homelessness demonstrates that with targeted intervention and support homelessness in Ireland can be reduced.

Research on homelessness in Ireland has primarily focused on specific groups such as families (Gambi, Sheridan, & Hoey, 2018; Hoey & Sheridan, 2016; Long, Sheridan, Gambi, & Hoey, 2019; Morrin, 2019; Morrin & O' Donoghue Hynes, 2018; Parker, 2021), young people (Bairéad & Norris, 2020; Mayock, Corr, & O'Sullivan, 2008; Mayock, Parker, & Murphy, 2014; Mayock & Parker, 2017; Mayock, Parker, & Murphy, 2021), women (Mayock & Bretherton, 2016;Mayock, Sheridan, Parker, & Dublin Region Homeless Executive, 2015), LGBTQ+ (Quilty & Norris, 2020) and Irish Travellers (Harvey, 2021). Research examining the systems and strategies which impact homelessness in Ireland and potential solutions has also been published (Allen et al., 2020; Lambert, Gill-Emerson, Horan, & Naughton, 2017; O'Sullivan, 2004; O'Sullivan & Musafiri, 2018; O'Sullivan, 2020).

Conclusion

Social policy research still has much to contribute to the field of homelessness (Culhane, 2013; Horsell, 2017). Taking a social policy approach in this thesis was appropriate for two primary reasons. The first is that the administrative data upon which this thesis is based was originally gathered in order to manage service delivery funded by the state in order to deliver on their legal responsibilities and policy objectives. The second reason is because effective policy designed to reduce homelessness is necessary if reaching functional zero homelessness is to be achieved the analysis presented in this thesis aims to provide evidence-based insights which may be used in policy evaluation and development.

Legal recognition of homelessness through the Housing Act (1988) has greatly impacted the level of intervention in the issue of homelessness by the state and local authorities. National policy has been regularly updated since 2000 and local authorities now allocate funding for homeless services and accommodation across Ireland. There have been efforts to improve delivery of homeless services through legislation (see: Housing (Miscellaneous Provisions) Act, 2009) and policy (see: DoHLGH and DRHE, 2019) as well as in changes to accommodation used for people in EA (O'Sullivan, 2020).

These policies, in terms of both objectives and quality are comparable to Finland, who have seen these objectives delivered, whereas Ireland has not (Allen *et al.*, 2020). It appears that the issue in the Irish context is delivering the solutions, such as social housing and self-contained units for homeless accommodation. In other words, it is the execution not the plan which is contributing to Ireland's ongoing homelessness and housing crisis. Despite efforts to reduce homelessness through legislation, policy and service provision, the number of people who use EA has significantly increased since 2014. While the increase in total numbers has been largely due to family homelessness, when examined in terms of household, this issue remains dominated by single adults (DoHLGH, various years).

The pressure of providing accommodation and services to people who experience homelessness falls predominantly on the Dublin local authorities through the DRHE. Dublin is Ireland's largest city and 44% of the countries urban population lives there (CSO, 2016b). In comparison, on average, 72% of the EA using population is in the

Dublin region. Homelessness in Ireland is, primarily, a Dublin issue, in addition to accommodation the largest number of homeless people in EA, the rate of homelessness in Dublin has risen far more than in the rest of the country. When the total EA using population in July 2014 was compared to December 2021, there was 174% increase nationally, 135% in counties outside of the Dublin region and 193% within the Dublin region (DoHLGH, various years).

With the increase of EA use, public spending on homelessness has also risen. As in the case of legislative and policy intervention, this significant investment in services has failed to produce any real impact on homelessness in terms of either effective prevention or speedy resettlement in housing. The majority of spending has been on providing EA (DoHLGH, various years), which, as discussed above and in the literature review, has very limited success in moving people through and out of homelessness (O'Sullivan, 2020). In order to shift this trend, more effective forms of accommodation and intervention are necessary. One of the key drivers and solutions to homelessness is housing. However, as discussed above, the Irish housing system is under significant strain. In order to solve homelessness, a wider intervention in the housing system is necessary. If this is done successfully it will have the added benefit of improving housing security not only for those who experience homelessness but for the wider housing vulnerable population.

Homelessness is one of the key social issues, not only in Ireland but internationally. Efficiently reaching functional zero homelessness requires significant investment by the state as well as evidence and outcome driven policy interventions. As has been seen in the Finnish case, this goal is not unattainable, however it will require a significant shift in how Ireland manages housing and homelessness. This thesis will contribute to the evidence base upon which this change may be built. The empirical chapters of this thesis will focus on the data gathered from the Dublin region for single adult EA users who first presented to EA between 2016-2018. Using this data, this thesis will demonstrate what it can tell us in regard to trends in EA use by single adults in the region. The literature relevant to this empirical research will be discussed in Chapter 2. The analytical framework through which this data can be interpreted and used in future research, policy making and homeless service provision will be presented in Chapter 3.

Chapter Two   Literature Review

Introduction

Vagrants, sturdy beggars, the (un)deserving poor, the homeless, those with no fixed abode, have been part of our societies and the subject of government and charitable action for centuries. Use of the word homeless specifically, can be traced back to the 18th century (Kusmer, 2002). In Ireland, the first government attempts to change the lot of those who were unable to house themselves began in the late 1700's when the first of the institutions which would become workhouses was built. In Dublin, towards the end of the 18th century and the beginning of the 19th, businessmen in particular, began to voice concern regarding the influx of beggars and vagrants living in the city (Woods & Walsh, 2018). In 1816 when John Griscom was visiting Dublin he wrote:

> The city presented a spectacle, at once afflicting and disgusting to the feelings of its inhabitants, the doors of carriages and shops, to the interruption of business, were beset by crowds of unfortunate and clamorous beggars, exhibiting misery and decrepitude in a variety of forms (Griscom, 1823).

In response to the growing rate of destitution in Ireland, the Poor Laws were introduced by the UK government to Ireland in the mid-19th century – albeit significantly later than they were introduced in England. The design of the Poor Laws reflected the belief at the time that the solution to poverty was work, specially through workhouses, which would mend the fiscal and moral deficits of the poor (Lucey, 2015). The Poor Laws were implemented across the United Kingdom and Ireland (Ingram, 1864) and from these we see the concepts of the 'sturdy beggar' (Cousins, 2013) and the (un)deserving poor (Thomas, 2017) manifested through legislation and state intervention in the community. These concepts reflect the ideal that all those who were seen as being able to work, should have work (the sturdy beggar and the undeserving poor), particularly men with no disabilities. The deserving poor (widows, orphans and people with visible or easily apparent disabilities) were to be pitied and considered worthy of charity.

Ideas and understanding of homelessness shifted considerably in the mid-20th century. During this period, Western societies and our understanding of how they

function changed dramatically. Significant efforts have been made by researchers and advocates to change the cultural and public perceptions of homelessness, with significant success by redefining our understanding of homelessness (Hopper, 2015). These efforts are examined in this chapter which reviews the elements of the very extensive academic and research literature on homelessness which are relevant to this thesis. The focus of this literature review was selected with reference to the research aims and objectives as set out in the introduction of this thesis.

The purpose of this review is to provide the context within which this thesis has been written and to identify the gaps in the literature which this thesis aims to fill. It opens with a discussion of key elements of homelessness, definition, prevention, becoming homeless, experiencing homelessness and leaving homelessness. This chapter will then discuss the current frameworks used for analysing experiences of homelessness. Next, it will examine the strengths and weaknesses of relevant frameworks. Finally, gaps in the current literature will be identified, and how the framework developed for this thesis will fill the gaps, presented.

Defining Homelessness

On a superficial level, the task defining of homelessness appears to be a relatively straightforward one - on opening a dictionary we can see that it is defined as to be without a home (Collins English Dictionary, 2022). Once we start to scratch the surface of that concept, as with so many aspects of the human experience, the meaning behind that definition becomes increasingly complex. Not only do we need to define what a home is, we must also establish what the lack of one means, which includes, psychological, social, economic and philosophical experiences as well as physical elements.

For Hannah Arendt (1958), the home is the private realm. It represents ownership (of property), family, belonging, privacy and security. The public realm by contrast is where we leave the private in order to engage in economic activities. Arendt argues that in the modern world the boundaries of these realms have become blurred, and merge more together than they did in the past. However, when an individual becomes homeless or reliant on the welfare state, they sacrifice their private realm (privacy) without gaining access to the public sphere and are therefore left in limbo with neither realm fully available to them (Arendt, 1958).

Kathleen Arnold (2004) expands upon Arendt's interpretation and the importance of the home in both the public and private sphere. In the public sphere the home and specifically having an address makes it easier to engage with society, to hold down or find a job, to vote, to socialise with neighbours and to be part of the local community. It also provides physical shelter from the elements and, once inside and within the personal sphere it allows individuals to live unobserved by the rest of society, to pursue hobbies or interests which are considered personal or private. Arnold argues that by becoming homeless people enter a form of statelessness as they lose certain rights and liberties that are awarded based on having an address. These include the right to vote, the right to privacy (particularly physical privacy) and the right to protection (both of the physical self and one's possessions) (Arnold, 2004).

Moore (2007) argues that homelessness is more than the absence of having a home. Homelessness has often been framed in the context of lacking something or being excluded and that this lack is the problem which must be solved. Moore points out that home is not necessarily a place of safety, that it can, for some people (particularly women and children) be a place of danger and fear. Obtaining the 'ideal' home can be used as a form of social control, that even those who have a home are constantly looking to improve or achieve something better, something closer to the 'ideal'. Homelessness itself is often used as a form of social control, a threat to those who do not cooperate or conform that unless they do, they will become homeless and will remain so until their behaviour changes. Home is a way of taking up space in the world and of being able to truly inhabit that space. More than the four walls, it gives you a presence which allows you to belong. Having a home is not the only way people can do this, however, when they take up space in other ways (squatting, sitting on the street, staying in hostels, making art or music) it is often criticised. Moore (2007) states that home is a network of connections that do not rest in one place or self alone.

Ravenhill (2008) provides a very useful summary of the five primary definitions of homelessness: legal; continuum; statistical; housing shortage; and general public. The legal definition of homelessness is worded and interpreted differently in each jurisdiction. In the Irish context this definition is provided in the Housing Act (1988) as quoted in the introduction to this thesis and discussed in more depth in Chapter One. These definitions usually include what would be considered 'absolute homelessness', such as sleeping rough or in a homeless shelter/hostel. They do not always include

more subtle or invisible forms of homelessness such as living in overcrowded settings or sofa surfing (Pleace et al., 2011).

Continuum definitions include everyone who is not in secure, permanent housing in an area of their choice as homeless (or at least at risk of becoming so). While very broad and inclusive this definition risks being overly inclusive (Ravenhill, 2008). In 2005 Feantsa, the European federation of organisations which work with homeless people, proposed their very influential continuum definition of homelessness called ETHOS. This definition is extremely broad, listing 13 types of homelessness including visible homelessness such as rough sleeping and invisible homelessness such as living temporarily with family/friends (FEANTSA, 2005).

Statistical definitions of homelessness are challenging because who is counted as homeless depends entirely on the data available and the objectives of the organisation gathering the data (Ravenhill, 2008). Even in countries such as Ireland, the data collected measures specific groups (people using emergency accommodation or people engaged in rough sleeping). The state also has control over who is 'counted' as homeless. For example, in 2018, the state removed 600 households from the reported EA using population as they had been moved to 'own front door' accommodation. The decision to no longer count these families was highly controversial as, technically, those households were still in homeless specific accommodation and not in long term, secure housing (O'Sullivan, 2020).

Housing shortage definitions are, in the modern context, the most commonly used definitions of homelessness. They focus entirely on homelessness being a failure of the market to supply sufficient housing at affordable prices and the subsequent failure of the state to provide social housing once the free market has failed. Little attention is paid to individual circumstances beyond housing status in these definitions, leaving them somewhat one dimensional (Ravenhill, 2008). In theory, a functional free market housing system should provide housing options for individuals at all price levels (with the expectation that quality, size, maintenance etc. would be linked to price). In practice, however, this is not the case as the supply side of the market has priced those at the lower end of the demand side out (O'Flaherty, 1995). One of the most relevant points O'Flaherty makes is that homelessness increases with national prosperity. Homelessness rises with increasing inequality, as the population that

cannot afford housing at the equilibrium price grows. As a result, the number of working homeless may increase as, while their income may not change, the value of that income does. While the number of working homeless is unavailable in the Irish context, there has an increase in employment among those who have applied for social housing. In 2020, almost half (46%) of those on the list for social housing were in some type of employment (Housing Agency, 2018).

The final definition identified by Ravenhill (2008) - the general public's definition of homelessness - is not often discussed in academic literature. However, when it is mentioned it is unsurprisingly the stereotype of a man with alcohol or drug addiction issues who sleeps rough (Kuhn & Culhane, 1998; O'Neil et al., 2017; O'Sullivan, 2020). The public's definition of homelessness is immensely important in relation to addressing homelessness as it will impact policy, politics and fundraising efforts by non-profits. Research addressing the public image of homelessness and how to change it has been conducted in the UK (O'Neil et al., 2017); in the Irish context the imagery more frequently used in the public sphere by non-profit organisations has tended to focus more on families' and women's homelessness in recent years, marking an intentional move away from the stereotypical imagery of homelessness.

Somerville's (1992, 1997, 1998, 2008) analyses are particularly strong on defining homelessness as a multi-dimensional experience as opposed to merely the lack of a home. Homelessness is not necessarily about where a person sleeps, rather it is a combination of emotional and physical experiences which result in a person's understanding or belief that they are or are not homeless. The structural explanation of homelessness, either that of the non-liberals focus on the free market or the liberal view of the failings of the welfare state to provide, both are inadequate to fully explain homelessness. They also fail to acknowledge the ideological element of homelessness, that as well as being a physical and emotional experience it is also an ideological construct. As Somerville explains,

> Neo-conservatives ignore the severe constraints which the economic and housing systems place upon individuals. Neo-liberals gloss over the poverty and misery which is associated with homelessness and which is always produced by freely operating markets. Social democrats tend to play down the role of the state bureaucracy in reproducing the

powerlessness and misery which the other theorists try to wish out of existence (Somerville, 1992, p 531).

What is clear from both the academic and personal commentary on this issue is that homelessness is complex and multi-dimensional. It is about more than walls or structure; it is about an emotional and physical sense of being. Homelessness is:

deprivation across a number of different dimensions - physiological (lack of bodily comfort and warmth), emotional (lack of love or joy), territorial (lack of privacy), ontological (lack of rootedness in the world, anomie) and spiritual (lack of hope, lack of purpose) (Somerville, 2008, p1)

Research on Experiences of Homelessness

Preventing Homelessness

Preventing homelessness is a key policy objective in Ireland at both the national (Government of Ireland, 2021a) and regional (DRHE, 2019b) levels. This shift towards prevention strategies for homelessness has also been seen internationally (Mackie, 2015). However, as highlighted by Shinn, Baumohl and Hopper in their 2001 article, *The Prevention of Homelessness Revisited*, when there is a significantly higher demand than supply of resources such as housing, prevention of homelessness for one individual may be placing another individual at higher risk of becoming homeless as the resources they need become allocated elsewhere (Shinn et al., 2001). The stark warning Shinn and colleagues give, that prevention services may not impact the overall increase of homelessness if they are not correctly resourced, has seemingly come to pass in the Irish context. Despite efforts at prevention discussed by Eoin O'Sullivan in his 2020 book, *Reimagining Homelessness: for policy and practice*, homelessness in Ireland has increased significantly since 2014 (DoHLGH, various years). International evidence also supports the idea that with the correct prevention supports and resources, homelessness can be avoided (Evans et al., 2016). However, if those resources are lacking and Shinn and colleagues argument is correct, prevention strategies will not prevent homelessness, merely reallocate it (Shinn et al., 2001).

Shinn and colleagues are not the only ones to critique prevention strategies, be they proposed by governments or academics. In their 2014 paper *What is Preventing us*

from Preventing Homelessness? A Review of the Irish National Preventative Strategy, Maher and Allen highlight the challenges to efficiency and effectiveness both in terms of delivering prevention services and in developing proactive strategies.

In recent decades, a number of prevention frameworks have been devised by academics in the field of homelessness internationally. Culhane, Metraux and Byrne, in their 2011 paper, *A prevention-centred approach to homelessness assistance: a paradigm shift?* highlight the lack of prevention orientated policy. They also point out how the prevention strategies which have been implemented have been done without regard to current systems or ensuring effectiveness (Culhane et al., 2011).

In their 2008 paper, *Effective Homelessness Prevention? Explaining Reductions in Homelessness in Germany and England,* Busch-Geertsema and Fitzpatrick provide a three-part classification which draws on conceptualisations from the fields of medicine and criminology. This encompasses:

- Primary prevention measures – activities that reduce the risk of homelessness among the general population or large parts of the population. It is at this level of prevention that general housing policy (supply, access and affordability), and the overall 'welfare settlement' (such as the availability of income benefits, housing benefits, employment protection and so on), are most relevant.

- Secondary prevention – interventions focused on people at high potential risk of homelessness because of their characteristics (for example, those with an institutional care background), or in crisis situations which are likely to lead to homelessness in the near future (such as eviction or relationship breakdown).

- Tertiary prevention – measures targeted at people who have already been affected by homelessness. From the analogy with medicine and criminology, it would make sense to subsume here 'harm reduction' measures such as rapid re-housing, so that homelessness is ended as quickly as possible. However, in England and Germany such measures would be described as 'resettlement' and not prevention. The preventative emphasis at this level is more often focused on minimising 'repeat homelessness', that is, avoiding the occurrence of

entirely new homelessness episodes (Busch-Geertsema and Fitzpatrick, 2008, p.73).

Fitzpatrick has since published a new prevention framework, this time with Mackie and Wood, which has five parts:

- Universal - preventing or minimising homelessness risks across the population at large.
- Upstream – early-stage prevention focussed on high-risk groups, such as vulnerable young people and risky transitions, such as leaving local authority care, prison, or mental health in-patient treatment.
- Crisis – preventing homelessness likely to occur within a foreseeable period.
- Emergency – support for those at immediate risk of homelessness, especially rough sleeping.
- Repeat – prevention of recurrent homelessness, especially rough sleeping (Fitzpatrick, Mackie and Wood, 2021, p. 82).

Culhane, Metraux and Byrne (2011, p.303) presented a two-part (or 'foci') model which involves "attaining housing stability and maintaining ties with community-based social and health services delivery networks". Like Fitzpatrick et.al (2021), Dej, Gaetz and Schwan (2020, p.403) developed a five-part typology for prevention which consists of the elements "prevention: structural, systems, early intervention, eviction prevention, and housing stabilization".

There is much disagreement within the literature in terms of specific actions or prevention measures which are required. The literature emphasises that prevention strategies must be appropriate for the context within which they are applied; appropriate measurements of success should be implemented; and appropriate resources should be allocated to prevent the risk of homelessness from shifting from one individual to another. Broader and more inclusive welfare safety nets have been shown to reduce the occurrence of homelessness in a community as they protect people against unexpected shocks to income or family circumstances (Byrne et al., 2013). Interventions such as rent subsidies have also been shown to have a positive impact on reducing the number of people entering homelessness (Imrohoro§lu & Zhao, 2021) and are available in Ireland, as discussed in Chapter One, how. However, it has also been argued that prevention services cannot be targeted at specific people

because homeless transitions are unpredictable due to the stochastic nature of human lives and the unobservable nature of much of human existence. This results in people being vulnerable to homelessness based on 'luck' rather than predictable behaviours or events (O'Flaherty, 2022). Prevention services therefore need to be accessible and adaptable as well as well resourced in order to be effective.

Becoming Homeless

In her influential book, *Hobos, Hustlers and Backsliders: Homelessness in San Francisco* (2010), Gowan presents three types of explanation which are frequently provided for homelessness. These three explanations are summarised as, sin talk, sick talk and system talk. Sin talk, the traditional or historical view of homelessness, is based on the idea that those who experience homelessness are criminal or lazy, the undeserving poor as described in the early British Poor Laws. Sick talk is the idea that people who experience homelessness are sick, usually with mental or addiction illnesses and need support in order to recover from these illnesses. System talk is the idea that homelessness exists due to either planned systemic inequality or systemic failures; and that these systemic issues have been exacerbated through the neo-liberalisation of welfare states (Marr, 2012).

These three categories are still influential on the literature over a decade after this book was written. Most homelessness researchers have dismissed sin talk, while acknowledging that people who experience homelessness are often disproportionately represented in the justice system (Burrows et al., 1997). Sick talk and system talk are now more commonly used and more often than not are combined as a single understanding of homelessness in the form of what is commonly referred to as 'New Orthodoxy' (Somerville, 2013). New Orthodoxy is based on the idea that difficult individual challenges or choices are made worse by the inability to remain in or return to the housing system due to structural barriers (McNaughton, 2008).

In their article*, An exploration of alienation and replacement theories of social support in homelessness*, Eyrich, Pollio and North (2003) dismantle the idea that people who experience homelessness have fewer people to depend on. Their innovative mixed methods study (which uses multivariant regression analysis) found that people in homelessness had family and/or friends they felt they could rely on. Most of those family and friends were housed. This suggests that it is not necessarily emotional

support that people lack, but it is possible that people who become homeless have a support network but lack other resources available to them. As the authors point out, there is also the possibility that some of their interviewees have a skewed view of their relationships due to excessive use of drugs such as cocaine which can lead people to have ideas about their lives which are not shared by their family and friends. In addition, the study did not employ a set definition of either friend or support and allowed the interviewee to self-define. They also did not interview those considered to be in the support network. Thus the findings of this research suggest that the previously widely held theory that people who experience homelessness have relatively small networks of support (Bassuk et al., 1996; Jackson-Wilson & Borgers, 1993; LaGory et al., 1991; Letiecq et al., 1998; Passero et al., 1991; Solarz & Bogat, 1990; Stovall & Flaherty, 1990) may be untrue.

Neale (1997) writes in, *Homelessness and Theory Reconsidered*, about the need for alternative theories of homelessness which are less dualistic than simply juxtaposing home versus no home or deserving versus undeserving. Neale acknowledges that some people need support to maintain housing and that homelessness is not always caused by extreme circumstances such as losing one's job or addiction and may simply be that a person does not have the practical and emotional skills to manage a tenancy. The alternative theories discussed are; feminism; post structuralism; postmodernism; structuration; and critical theory (Neale, 1997).

Key events or 'shocks' which trigger a person to become homelessness have been identified through self-reported information as income or addiction/health shocks for single people and income or relationship shocks for families (O'Flaherty, 2009). Fitzpatrick and colleagues identify from homelessness research key events which occurred within individual's lives and triggered their entry into homelessness, these were: leaving the parental home after arguments; marital or relationship breakdown; widowhood; discharge from the armed forces; leaving care; leaving prison; a sharp deterioration in mental health or an increase in alcohol or drug misuse; a financial crisis or mounting debts; eviction from a rented or owned home (Fitzpatrick et al., 2000, p. 28). In a later article, Fitzpatrick (2005, p.4) outlines the New Orthodoxy perspective for risk of becoming homeless as:

structural factors create the conditions within which homelessness will occur; and people with personal problems are more vulnerable to these adverse social and economic trends than others; therefore, the high concentration of people with personal problems in the homeless population can be explained by their susceptibility to macro-structural forces, rather than necessitating an individual explanation of homelessness.

Fitzpatrick goes on to hypothesise that, from a realist perspective, the causes of homelessness can be categorised as follows:

- economic structures – social class interacts with other stratification processes and welfare policies to generate poverty and to determine poor individuals "and households" (non-) access to material resources such as housing, income, employment and household goods.
- housing structures – inadequate housing supply and a deterioration in affordability can squeeze out those on lower incomes; tenure and allocation policies, coupled with the collective impacts of private choices, can lead to residential segregation and spatial concentration of the least advantaged groups.
- patriarchal and interpersonal structures – can lead to the emergence of domestic violence, child neglect or abuse, weak social support, relationship breakdown, etc.
- individual attributes – personal resilience can be undermined by mental health problems, substance misuse, lack of self-esteem and/or confidence (Fitzpatrick, 2005, p.13).

As with many human experiences, homelessness is something we fear until it is experienced. As Ravenhill (2008) discusses, once the first few days of homelessness have elapsed people are able to "learn how to become homeless". Ravenhill establishes that

[I]it is not the triggers of homelessness themselves that result in rooflessness, but the accumulation of triggers – especially if they were experienced in quick succession. In fact, rooflessness appears to be

predominantly a solution to existing problems rather than the problem. On average, 7–9 years elapse between triggers commencing and rooflessness occurring. Furthermore, there was an average of 1–2 years in precarious housing, episodic use of emergency accommodation for homeless people (not rooflessness) and continuous vulnerability to rooflessness before rooflessness occurred, despite, in many cases, determined attempts to avoid it (Ravenhill, 2008, p.2).

In addition to this insight, Ravenhill examines the relationship between homeless services and their clients and the homelessness industry which is created through this co-dependent relationship. Unlike many relationships between supplier and consumer though, there is a strong imbalance in power. In addition to this there is the question of the morality of having private organisations (including charities) provide these services. Namely because by providing private jobs in homeless services you create a perverse incentive to maintain homelessness rates. If the services were 100% successful, they would work themselves out of a job. Thus, homeless service providers need people to be homeless in order to keep their jobs and in many cases, people experiencing homelessness need these services in order to leave homelessness (Ravenhill, 2008).

Experiencing Homelessness

Ireland has a long history of institutionalisation, not only in the form of prisons, mental health facilities or state care for minors but also in the form of workhouses, county homes and mother and baby homes (O'Sullivan & O'Donnell, 2012). The shelter model has already been in place long enough to have had a significant impact on the history of homeless service provision (Volker Busch-Geertsema & Sahlin, 2007). There is a risk of homeless accommodation having an institutionalising impact on people who stay there. Stark, (1994), argues that shelters impair people's ability to leave homelessness by infantilisation and disempowerment. Research has found a link between experiencing homelessness and having difficulty securing stable accommodation (Khan, 2010). In addition to this, it has been observed that longer people remain in homelessness, the more challenging it is to exit (Cobb-Clark et al., 2016). People may also experience multiple episodes over time which they find challenging to break out of (Anucha, 2005; Johnson et al., 2015; May, 2000). The length of time people spend in homelessness has been shown to be impacted by their

childhoods, work histories, education and age when homelessness first occurred (Scutella et al., 2013).

As O'Flaherty (2012) highlights, the continued existence of emergency accommodation is important as a form of social protection and its existence within the welfare state is one which needs acknowledgement. However, there is significant debate within homelessness literature regarding the models which should be used in emergency accommodation. The staircase model has been implemented internationally but appears to be potentially increasing the institutionalisation effect by focusing more on clients becoming 'housing ready' than housed (Gaboardi et al., 2019). While this model has been shown to be helpful for some people who are willing to engage with substance abuse rehabilitation services while in a co-living environment (Harris, 2016; Tainio & Fredriksson, 2009), it has also been shown to make people feel trapped in homelessness and in some cases has made a situation worse rather than better (Gerstel et al., 1996). As Gerstel, Bogard, McConnell, & Schwartz, discuss in their 1996 paper, *The Therapeutic Incarceration of Homeless Families*, the shelter model provides services most likely to be funded and such services may not prioritise rehousing the people they work with. Shelters often follow the idea of individuals needing to be 'housing ready' in order to leave shelter accommodation. This idea operates under the false assumption that people who become homeless must be helped to be able to live in private homes in the future. Not only did Gerstel and colleagues establish that the families included in their research were already housing ready, they showed how the shelter accommodation delayed people from exiting homelessness (Gerstel et al., 1996).

In his 2018 book, *The Homeless Person in Contemporary Society*, Parsell identifies the clash between what supports are needed by the individual who experiences homelessness and the paternalistic view that the rest of society knows what people experiencing homelessness need. Through his research he has found that some individuals need a huge amount of engagement with services to ensure even basic needs and activities are looked after. However, he also identifies that this is not the experience of all adults who experience homelessness, and many stated their desire to be treated more as autonomous adults, particularly in terms of how they are allowed to use temporary accommodation. Parsell's research demonstrates the diversity of need within the homeless population. This supports the idea that homeless services

need to have the flexibility to be individualised based around each person who needs support in order either to return to housing or to avoid homelessness from occurring at all (Parsell, 2018).

In addition to having no evidentiary basis (O'Sullivan, 2020), the use of hostel style temporary accommodation has been shown to lengthen the amount of time people remain in homelessness (Tsemberis & Henwood, 2016) and have a detrimental impact on the mental wellbeing of people who experience homelessness (Fitzpatrick, 2000; Hoffman & Coffey, 2008; McMordie, 2020). Staying in hostel style accommodation may, in some jurisdictions, even carry increased risk of criminalisation through cooperation between shelter providers and police forces (Herring, 2021). Further research has shown that hostel style accommodation is not suitable for habitation and may be used by the organisations who run it as a form of control (Dordick, 1997; Joniak, 2005; Marcus, 2003; Marr, 2012; Stark, 1994).

Leaving Homelessness and Housing and Support Needs

The focus of policy makers and service providers is often to assist people who experience homelessness in finding permanent, secure accommodation. Anderson discusses pathways out of homelessness in her 2001 paper, *Pathways Through Homelessness: towards a dynamic analysis*. She notes that while these pathways could be generalised, their relevant significance could not be established. She summarises the key routes out of homelessness as:

- Resolving accommodation problems and becoming settled independently without approaching statutory or voluntary agencies
- Resolving accommodation problems and becoming settled independently after being rejected by statutory agencies or withdrawing application
- Acceptance as statutory homeless and obtaining mainstream unsupported housing
- Resettlement by statutory or voluntary agencies through or into accommodation with temporary support followed by access to mainstream unsupported housing
- Resettlement by voluntary or voluntary agencies into permanently supported accommodation (Anderson, 2001, p.10).

One of the limitations of Anderson's approach is that it emphasises the availability of social housing as the sole route out of homelessness. In countries where social housing availability is significantly limited, evidence of its impact on reducing homelessness cannot be accurately assessed (Johnson et al., 2015). However, accessibility to affordable, suitable and where necessary supported housing (Busch-Geertsema & Edgar, 2010; Johnson et al., 2008) is certainly a key factor in helping people to leave homelessness. The advantage of social housing is the control over price and allocation the state holds in terms of prioritising vulnerable groups, such as people who experience homelessness, within a society (Pleace et al., 2011; Scanlon et al., 2014). It has also been shown that in countries where there is reasonable access to social and affordable housing, homeless people are more likely to have high support needs rather than a simple housing need (Benjaminsen & Andrade, 2015). Although some evidence has shown that age and gender impact the length of time spent in homelessness and exits from homelessness (Cobb-Clark et al., 2016), access to resources is one of the most important factors in relation to exiting homelessness, this access has been found to be more important to exit success than previous individual behaviour (Marr, 2012).

Frameworks for Analysing Experiences of Homelessness

Culhane and Kuhn's Typology of Homeless Episodes

There is a long history of using data on shelter (i.e. emergency accommodation) usage to research homelessness, particularly in the United States. This research traditionally focussed on the personal characteristics of residents, their life histories, particularly of adverse experiences, and their relationship with homelessness (Waldron et al., 2019). However the three articles using shelter data which were published by Dennis Culhane and Randall Kuhn in the 1990s had a transformative impact on this field of analysis by focussing on residents' shelter usage patterns rather than just their personal characteristics (Wong, Culhane and Kuhn, 1997; Culhane and Kuhn, 1998; Kuhn and Culhane, 1998).

The first of these articles, examines shelter use patterns for families in New York (Wong et al., 1997) and the second two use data gathered in both New York and Pennsylvania for single adults (Culhane and Kuhn, 1998; Kuhn and Culhane, 1998). The data from New York was gathered over eight years in total and the shelter use of

each individual included in this dataset was analysed over three-year periods. The Pennsylvania data was gathered over five years and the individual shelter use is analysed over two-year periods. The authors employ a range of statistical techniques to analyse these data, but their typology of homeless shelter usage patterns is based primarily on cluster analysis. In the first two papers this typology is sketched, tested, and refined. In the third paper, entitled *Applying Cluster Analysis to Test a Typology of Homelessness by Pattern of Shelter Utilization*, this typology is presented as a developed theory (Kuhn and Culhane, 1998).

This typology identifies three typical patterns of usage of homeless services which reflect 'homeless episodes' meaning breaks in their shelter use of 30 days or more. These are:

- Transitional: applies to individuals who use shelters for less than 100 days and who have very few homeless episodes.

- Episodic: includes individuals who have multiple homeless episodes, and

- Chronic: applies to individuals who use shelters for a long period of time but who have very few homeless episodes.

Kuhn and Culhane (1998) explain that, in addition to their own data analysis, their choice of these three patterns was influenced by other research into homelessness which has reached similar findings (eg. Cohen & Sokolovsky, 1989; Farr, Koegel, & Burnam, 1986; Piliavin, Sosin, Westerfelt, & Matsueda, 1993; Rossi, 1989; Weitzman, Knickman, & Shinn, 1990).

During the time period considered (two or three years depending on the city), an individual's shelter use was analysed based on nights stayed and the number of homeless episodes. If an individual took a break of 30 days or more between shelter stays their next stay would be regarded as a new episode. The transitional group was identified as having few episodes (1.36 in New York and 1.19 in Pennsylvania) and used shelters over a small number of days (57.8 days on average in New York and 20.4 days in Pennsylvania). The episodic group was identified as having the highest number of episodes (in New York this was 4.85 episodes; in Pennsylvania it was 3.84 episodes) and the number of days spent in EA was higher than the transitional group

but lower than the chronic group (averaging 263.8 in New York and 72.8 in Pennsylvania). The chronic group had a slightly higher number of episodes compared to the transitional group (New York group = 2.27; Pennsylvania group =1.53) but the average number of days was considerably higher than either the transitional or episodic groups in both cities (New York = 637.8 days; Pennsylvania = 252.4 days).

As Kuhn and Culhane (1998, p.208) describe:

> the typical homeless person has been regarded as a middle-aged to older man who is frequently unemployed, often mentally ill, handicapped, or an abuser of substances, and who exhibits little or no attachment to common media of social solidarity such as family, workplace, or membership in any unions or organizations.

They go on to argue that the 'new homeless' no longer fit this stereotype and use their three-part typology to demonstrate how people in New York and Pennsylvania were most likely to be in homelessness for short periods of time rather than experience episodic homelessness or chronic homelessness. This changing demographic provides an important insight into how the experience of homelessness is changing (Tobin and Murphy, 2016) but it also tells service providers and policy makers how the population is using available services.

Other Applications and Analyses of Culhane and Kuhn's Typology

Culhane and Kuhn's typology has since been tested using data on homeless shelter usage in Canada (Aubry et al., 2013), Denmark (Benjaminsen & Andrade, 2015) and Ireland (Waldron et al., 2019). This research has revealed that the same three patterns of shelter use exist in all four countries, though with variations in the proportions of homeless people in each group. In the USA and Canada, the transitional group was the largest followed by the episodic group and then the chronic group. In Ireland and Denmark, the transitional group was also the largest, the chronic group was the second largest and the episodic group was the smallest.

Fitzpatrick and Stephens (2007) suggest that these differences between North American and European countries may be due to variations in welfare state regimes, inequality and housing rights. They hypothesise that countries with a more generous welfare regime would have lower levels of poverty, inequality and homelessness but that those who do become homeless are likely to have higher and more complex

support needs. Benjaminsen and Andrade's (2015) research on Denmark supports this view. Denmark as a country has a highly-decommodifying, social democratic welfare state (according to Esping-Andersen, 1990) but a high proportion of the homeless population in Denmark present complex mental health and addiction issues (according to Benjaminsen & Andrade, 2015). This suggests that Ireland is likely to fall somewhere between the American and Danish extremes – Ireland's welfare state is classified in the same liberal category as the USA by Esping-Andersen (1990), but the former's welfare state is more generous and its social housing sector and public spending on low income housing is proportionately much larger (Norris, 2016).

Homeless Pathways

The Pathways model has been applied to the study of homelessness since the early 1990's (Weitzman et al., 1990). This approach has been widely discussed and applied in research on many countries, groups and individuals (Anderson, 2001; Chamberlain and Johnson, 2013; Fitzpatrick, Bramley and Johnsen, 2013; Mayock and Corr, 2013; Thurston *et al.*, 2013; Piat *et al.*, 2015).

In their 1990 paper, *Pathways to Homelessness Among New York City Families*, Weitzman, Knickman and Shinn argue that "routes into homelessness may best be understood at the microlevel" (p.125) and identify three pathways into homelessness based on previous accommodation. These are, primary tenant (whose longest residence in the year prior to homelessness had been in their own accommodation), previous primary tenant (who had once been primary tenants for a year or more) and never primary tenant (those who had never had a stable home of their own).

Pathways through homelessness for young people has been discussed in detail by Fitzpatrick (2000) in her book *Young Homeless People*. Fitzpatrick identifies six pathways through homelessness as:

- unofficial homelessness in the local area;
- alternating between unofficial and official homelessness in the local area;
- stable in the official network in the local area;
- alternating between unofficial homelessness in the local area and the official city network;
- staying in the official city network;

- city centre homelessness (Fitzpatrick, 2000, p.48-49).

Fitzpatrick does not claim that these pathways are an exhaustive list nor that all young people will 'fit' one of them. The pathways identified are based on the experiences of 25 young people who participated in the research along with insights provided by other young people who participated through group interviews (Fitzpatrick, 2000).

What Anderson (2001) highlights is that while there is no 'one size fits all' pathway into homelessness there is overwhelming evidence that some socio-economic characteristics, such as poverty and unemployment, increase the likelihood of experiencing homelessness, which suggests that policy should focus on more vulnerable groups. In theory, by ensuring that the most vulnerable people are protected from homelessness, each group above them in the socio-economic scale will also be protected. Anderson argues that people are assigned to specific socio-economic groups based on rough estimates of shared commonalities. She also states that there is overlap between groups and that there are always outliers. The paper is far less dogmatic than many theories. It is clear that pathways should be used a tool to increase understanding but not used as the sole explanation of homelessness. Anderson highlights specific trends drawn from her analysis of the data. Women tend to become homeless at a younger age than men and lone parents are at higher risk than those parenting as a couple. For young people, poverty, unstable home life, violent home life and living with stepparents all increase the risk of experiencing homelessness. Men are more likely to sleep rough. Hostel residents are also mostly male but, as Anderson notes, hostels have traditionally been focused on single men (often with addiction issues). In the UK (as with the US) people of colour are more likely to have experienced homelessness (Anderson, 2001).

Anderson and Christian (2003) show that homelessness is caused by the lack of access to appropriate housing (structural factors) combined with additional challenges faced by the household (institutional factors; family background factors; individual factors; and triggers). Some of these challenges such as early childhood trauma and adverse life experiences have been explored and shown to increase the likelihood of experiencing homelessness (Fitzpatrick et al., 2013).

Chamberlain and Johnson (2013), in their paper, *Pathways into Adult Homelessness*, identify five 'typical' pathways into adult homelessness. They call these: 'housing

crisis', 'family breakdown', 'substance abuse', 'mental health' and 'youth to adult', reflecting similar themes to those found in previous research (Anderson, 2001; Anderson and Christian, 2003; Fitzpatrick, Bramley and Johnsen, 2013).

David Clapham, who developed the pathways framework, has described the Pathways Approach as a way of understanding homelessness through combining structural and individual factors in the research process (Clapham, 2003). In his book *The Meaning of Housing: A pathways approach*, views homelessness as 'an episode or episodes in a person's housing pathway" (Clapham, 2005, p.206). Clapham calls for more research into homelessness focussing on the interaction between the service provider and service user. He argues that this approach would allow for policy evaluation and potentially facilitate changes in policy and service provision processes (Clapham, 2005, p. 210).

Housing and Homelessness Across the Life Course

As we grow up, our housing needs change. We move from living under the care of others in housing provided for us. Ideally on moving into adulthood we move to accommodation separate from our childhood homes with many of us eventually providing homes for our own children (Beer *et al.*, 2011). Most people have a particular set of criteria or ideals in mind described as Kairos by Metcalfe (2006), where an opportunity is given, taken, or created by individuals in order for the housing transition to occur. Kuh *et al.* (2003, p. 778) define life course epidemiology as "the study of long-term effects on later health or disease risk of physical or social exposures during gestation, childhood, adolescence, young adulthood and later adult life". The importance of the life course in terms of understanding the human experience has been well established in academic literature (Worth & Hardill, 2015). It has also been established that our early childhood experiences have an impact on the future possibility of experiencing homelessness (Larkin & Park, 2012; Roos et al., 2013).

In adulthood, as we move through the life course our housing needs will change depending on our individual circumstances (Feijten & Mulder, 2005). Consequently, this concept has been commonly discussed in the academic literature on housing and a number of perspectives have been developed(Beer *et al.*, 2011). These perspectives include housing careers (Kendig, 1984), housing histories (Forrest, 1987) and housing pathways (Clapham, 2005).

In the contemporary world, particularly in high income countries such as Ireland, most people will live in a number of different homes over the course of their life and an enormous body of research has accumulated over the last fifty years which examines this issue (Feijten & Mulder, 2005). Broadly speaking this research highlights a strong correlation between stage in the life cycle and the type of housing occupied and examines the factors which influence this relationship (Long, 1992). This relationship has been researched from multiple perspectives. The most popular approaches to researching this relationship between life stages and housing include housing careers, housing histories and housing pathways (Beer *et al.*, 2011). Housing careers can be summarised as the study of the correlation between the housing a household occupies and the life stage of the head(s) of that household (Kendig, 1984). Housing histories explore how external, structural factors influence the housing a household will occupy. The life stage of the head(s) of the household can act as a positive factor in their ability to move home or a stagnating factor which prevents a desired move (Forrest, 1987). Housing pathways focuses on not only the housing and life stage of a household but also the meaning of home (Clapham, 2005). Each of these are intrinsically linked to socio-economic considerations and the ability to access resources (Beer *et al.*, 2011).

An alternative framework for analysing changes to housing circumstances over the life course is proposed by Beer, Faulkner, Paris and Clower (2011) in their book *Housing Transitions Through the Life Course*. They argue that the term 'housing transitions better reflects the complex and fluid relationship between individuals in developed economies and their housing in the 21st century' (Beer *et al.*, 2011, p.31) This is because, in contrast to the housing careers literature which emphasises a series of typical steps up the 'property ladder' which is followed by most adults, the concept of housing careers focuses on 'ongoing change – potential or real – in housing circumstances and leaves open the possibility of identifying common housing 'sequences' that may shift over time in response to social, economic and cultural developments' (Beer *et al.*, 2011, p.31). Furthermore, in contrast to the thinking on housing pathways, the idea of housing transitions 'does not privilege the subjective dimensions of housing over quantitative assessment' (Beer *et al.*, 2011, p.31).

According to Beer *et al.* (2011, p.31) 'It is helpful to think of a lifetime of housing transitions as a series of housing decisions about whether to move or not move, the quality and quantity of housing to occupy, location relative to employment and social

networks'. They emphasise the complexity of the decision-making environment as housing decisions are shaped by numerous opportunities and constraints at different times. However, their analysis emphasises the particularly significant role played by the following five dimensions: stage in the life course; economic resources; health and well-being; tenure; and lifestyle values and aspirations (Beer *et al.* 2011, p. 31). Thus for Beer *et al.* (2011) the housing decisions which an individual makes reflect the relative balance and standing of each of these dimensions at that point in their life cycle.

In very broad terms, over the life-course they argue that an individual would be expected to live in the parental family home until early adulthood (between 18 and 25 years), then to move to independent living, be that with friends, or in university accommodation, etc. During the next stage in life people would be expected to form their own household and live either alone or with a partner, possibly followed by children (30-45). Finally, in later life (aged 70+) people often live alone or with a partner and potentially move to a retirement facility or care home.

As mentioned in the introduction to the thesis the concept of housing transitions had been applied to homelessness by Carol McNaughton in her 2008 book - *Transitions Through Homelessness: lives on the edge.* She identifies three key components of this type of transition, '1. Relationships and social networks; 2. Level of resources (economic, social, human and material capital); and 3. Experiences of edgework (both involuntarily due to extremely traumatic events occurring, or voluntarily, due to substance use or criminal acts)' (McNaughton, 2008, p.63). The concept of edgework combined with personal capital is central to McNaughton's work. She defines edgework as 'actions and events that involve negotiating at the edge of normative behaviour' (McNaughton, 2008, p. VII). McNaughton (2008) theorises that homelessness is likely to occur when the social, human and economic capital resources required to support a housing transition have been exhausted or cannot be relied upon. McNaughton's research draws on interviews conducted with 28 homeless people over a year, which enabled her to identify and discuss their homeless transitions during that time. Participants in her research were asked to identify their reasons for homelessness. They identified: 'alcohol use (5); drug use (4); domestic violence (4); breakdown of family or couple relationship (6); bereavement (3); mental illness (2); leaving care with nowhere else to go (2); debt (1); and leaving poor quality

housing (1)' as the most common reasons for becoming homeless (McNaughton, 2008, p.55). What was also clear throughout these interviews was that becoming homeless was often the outcome of a sudden or traumatic experience which caused the individual to leave their previous accommodation.

Impact of Contributory Events Unrelated to Housing

The importance of experiences and influences beyond housing need in relation to precipitating homelessness is well established in research on homelessness. However, much of the research on this topic has been framed in the context of housing pathways and as such has been discussed already in this literature review. Moreover, specific risk factors or events/experiences which have an impact on homelessness have been identified by several academics as additional factors rather than specific pathways. For example, Fitzpatrick and colleagues have compiled a list of risk factors from relevant research in the field, including: offending behaviour and/or experience of prison; previous service in the armed forces; lack of a social support network; debts, especially rent or mortgage arrears; causing nuisance to neighbours; alcohol misuse; school exclusion and lack of qualifications; mental and physical health problems (Fitzpatrick, Kemp and Klinker, 2000, p. 28). Anderson and Christian (2003, p.114) expand upon these risk factors to include additional factors which impact homeless pathways which they list as: gender; ethnicity; rooflessness; length of time in homelessness; and repeat homelessness.

Fitzpatrick, Bramley and Johnsen (2013, p.158) present an extensive list of possible associated events experienced by people who also experience homelessness, including housing and non-housing related events. These are:

- Stayed with friends/relatives ('sofa-surfed').
- Stayed in hostel or other temporary accommodation.
- Applied to council as homeless.
- Prison.
- Victim of violent crime.
- Very anxious or depressed.
- Admitted to hospital with mental health issue.
- Used hard drugs; Injected drugs.
- Abused solvents, gas or glue.

- Problematic alcohol use.
- Divorced or separated.
- Bereaved.
- Made redundant.
- Slept rough.
- Street drinking.
- Begged.
- Survival shoplifting.
- Bankrupt.
- Evicted.
- Home repossessed.
- Thrown out by parents/carers.
- Local authority care as child.
- Survival sex work.
- Charged with a violent criminal offence.
- Victim of sexual assault as adult.
- Attempted suicide; and self-harmed.

These factors contribute to homelessness occurring, increase the risk of homelessness occurring and/or impact the experience of homelessness. Given the considerable list identified by Fitzpatrick, Bramley and Johnsen (2013), further research using contributory events may provide more insight into their relevance in the international context.

Analysis of Strengths, Weaknesses and Relevance

While the frameworks for analysing homelessness summarised above display undoubted strengths and have been influential, comparison with the empirical evidence of the homeless experience, as described in the first half of this chapter, reveals certain weaknesses. In addition, not all of these frameworks are directly relevant to the analysis of emergency homeless accommodation users in Dublin which is the focus of this thesis. The section which follows considers the strengths, weaknesses and relevance of these frameworks for analysing experiences of homelessness. This discussion informs the selection and design of the analytical

framework employed in this thesis which is outlined in the Introduction to the thesis and presented in more detail in Chapter Three.

Strengths and Weaknesses of Culhane and Kuhn's Typology

Culhane and Kuhn's typology has undoubted strengths and has made a landmark contribution to the field of homelessness research. As the authors themselves point out, in terms of data quality and conceptual clarity their analysis marks a significant improvement on previous cluster analyses of homeless shelter data which 'pooled information on homeless experience, background characteristics, measures of social connection, and treatment variables, typically from small samples of homeless persons' (Kuhn & Culhane, 1998, p. 209), whereas Kuhn and Culhane's (1998, p. 209-210) analysis draws on very large and robust data sets and tests in the development of their three-part typology:

> a more parsimonious, theoretically grounded model based only on homeless experience, attempting to confirm that the demographic, socioeconomic, and treatment backgrounds of the clusters are distinct from each other and reflect the expected characteristics associated with membership in a given cluster.

O'Sullivan (2020) makes the point that Culhane and Kuhn's typology has helped to dispel the previously widespread myth that most homeless shelter users are predominately long-term homeless older men with drug or alcohol dependency and mental health issues. The aforementioned research which applied their typology to the Irish, Canadian and Danish contexts, confirmed the existence of multiple experiences of homelessness within shelter populations and it is now widely recognised by researchers that there are multiple forms of shelter use (Allen et al., 2020).

However, Culhane and Kuhn's typology does have conceptual and empirical weaknesses. Some of these relate to their broad approach to researching homelessness, while others relate to how it is applied to the specifics of their analysis and the assumptions which underpin it. The shortcomings of their broad approach to researching homelessness are shared by all analyses of homeless shelter data, including the research presented here, which partially replicates Culhane and Kuhn's methodology. indeed Culhane and Kuhn acknowledge the existence of these

shortcomings (see: Wong et al., 1997). For instance, a key problem in Culhane and Kuhn's work and in all shelter data analyses is that they examine a very narrow window of time in the lives of homeless people and therefore do not consider their previous experiences of homelessness or broader 'housing careers' (McAllister et al., 2011). Information on the latter can provide important insights into an individual's life experience, support needs and prospects of exiting and also re-entering homelessness (Goering et al., 2002). In addition, as a cohort study of shelter users, Culhane and Kuhn's analysis by definition excludes those who are homeless but not using shelters. McAllister et al. (2011) argue that this is not inherently problematic since shelter data analysis can generate findings which are very useful to the managers of these services. However, they point out that it is problematic when frameworks generated from shelter data are employed to theorise about homelessness more broadly and Culhane and Kuhn's typology has been regularly used in this way in the literature on homelessness.

A key problem in Culhane and Kuhn's application of their framework relates to the total duration of the homeless experiences examined. In their different studies, Culhane and Kuhn examined shelter usage over a two- or three-year period. While their first two articles on this issue did examine whether clients had exited homelessness during the research period (Culhane & Kuhn, 1998; Wong et al., 1997), this issue is not considered in their third paper in which their analysis of homeless episodes is first presented as a coherent typology (Kuhn & Culhane, 1998). However, the issue of how many of the individuals in their data set had successfully exited homelessness by the end of the three-year observational period and, importantly, how many remained in homeless shelters, is particularly important when considering who is included in their 'chronic' category and who is not. A related problem is that it is not clear how long into their two or three-year observational period the final homeless episode occurred. This is an important consideration when assessing who should be included in their transitional group. Notably, in subsequent application of Culhane, Kuhn's three-part typology to the Canadian, Danish and Irish cases (Aubry et al., 2013; Benjaminsen & Andrade, 2015; Waldron et al., 2019) rates of final exit from homeless shelters are not reported (numerically) and only discussed briefly.

Culhane and Kuhn's use of a 30-day break in shelter use as the key measure of homeless episodes is also problematic. They explain that this was chosen because it

shows a distinct break in shelter use while indicating that the individual has not exited homelessness (Kuhn and Culhane, 1998).   While this is a perfectly reasonable rationale, the specific choice of 30 days for the duration of the break appears somewhat random and it can disguise important potential insights into shelter usage. For instance, this approach can lead researchers to 'collapse' homeless episodes together. If someone has taken multiple breaks from homelessness of fewer than 30 days, these are removed from the analysis and the days on which they did use EA are grouped together into a single episode. Although all the researchers who have used this method have clarified that they have collapsed homeless episodes together, they don't specify how often they needed to do this. The result is that an individual with a highly erratic pattern of shelter use may have been included in either the transitional category or (as may be more likely) the chronic group implying that they have had few breaks in their shelter use.   Accurately identifying erratic EA usage is particularly important when considering risky behaviour such as rough sleeping. An individual may be sleeping rough one or more nights a week in between using shelter services over a 30-day period; and identifying this type of usage pattern is very important for designing appropriate service supports; analyses which disguise this behaviour are less valuable to these important stakeholders.

Strengths and Weaknesses of the Pathways Framework When Applied to Homelessness

As discussed above, the pathways framework has been very widely used in research on housing and also to identify pathways into, through and out of homelessness. While the research conducted using this framework has certainly bolstered understanding of these issues, some important criticisms have been raised regarding its application to research on homelessness (Carmichael, 2020).

One key criticism relates to the adequacy of the application of this framework to research on homelessness. Fopp (2009) argues that it is often used as a 'metaphor' in this research field, rather than employed rigorously as an analytical framework. Somerville (2013) also argues that many applications of the pathway's framework have often been under-theorised and inadequately specified. He argues that, 'the identification of a particular typology of pathways may, therefore, to some extent, reflect the interests of the researchers involved' (Somerville, 2013, p. 390) rather than providing more in-depth understanding of people's histories or biographies as a result of their particular pathways. One example is identification of being in state care as a

pathway into homelessness, emphasis is often placed on the experience of living in care as opposed to the experiences which led to the person being placed in care (Ravenhill, 2008). In Ireland, it has been found that the introduction of after care services has significantly reduced the number of young people entering homelessness from state care (Bairéad & Norris, 2020); this indicates that this group needs continued support but does not clearly establish that living in care causes homelessness.

A further problem is that the historical body of research on homeless pathways relates to its lack of distinct conclusions as to defined pathways into, through and out of homelessness. Tracing all aspects of the pathways followed by this hard-to-reach group, often with chaotic lifestyles, is extremely challenging, some successful exits may involve moving to residential treatment or back home to family but these aspects have yet to be fully explored in research using a pathways approach (Ravenhill, 2008). As a result, the research has tended to focus more on pathways into and through homelessness, as opposed to out of it (Anderson & Tulloch, 2000). Thus despite the fact that Clapham's (2005) book which originally proposed this framework emphasised the benefits of examining pathways over the long term, many of its applications in practice to research on homeless fail to do so. This issue is highlighted by Ravenhill (2008, p. 183) who argues:

> pathway analysis is useful as a snapshot view of tenancy outcomes and routes into and through a variety of types of accommodation. However, it offers very little information about episodic rooflessness, timescales, the struggle to resettle and the obstacles and hurdles faced by those attempting to re-join housed society.

Ravenhill (2008, p. 183) notes that in terms of time-scale, pathways approaches tend to focus on a six month period, despite evidence that rehousing generally takes more than 18 months on average (Dane, 1998). As discussed later in this thesis, analysis of the data on EA users in Dublin confirms this view as does a number of other follow-up studies on people's living situations (Craig et al., 1996; Stockley et al., 1993). In addition to this, the pathways approach cannot cover every possible viable form of exit, thus potentially successful exit strategies go unrecognised (Somerville, 2008).

The pathways approach focuses on the role and significance of agency within the experience of homelessness. As defined by Long (1992, p. 22-23):

In general terms, the notion of agency attributes to the individual actor the capacity to process social experience and to devise ways of coping with life, even under the most extreme forms of coercion. Within the limits of information, uncertainty and other constraints (e.g. physical, normative or politico-economic) that exist, social actors are 'knowledgeable' and 'capable'.

While this focus is valuable, it may have inadvertently contributed to an assumption that those who are homeless live outside of mainstream society and that homelessness is a barrier which must be overcome, through housing, to re-enter the mainstream (Farrugia & Gerrard, 2016). The use of the concept of agency which is inherent to the understanding of 'pathways' may contribute to this social exclusion as it can inadvertently assign blame or the assumption of choice on the individual (Fopp, 2009). Within this context it is important to acknowledge, as McNaughton (2008, p. 46) does that 'agency does not refer to actual actions or outcomes, but to the internal processes, independent of but embedded in structures, that individuals subjectively experience'. As highlighted by Fitzpatrick, Bramley and Johnsen (2013) people who experience homelessness often experience multiple forms of social exclusion, not just in relation to housing; and the choices made by people who experience homelessness have to be considered in the context of the options available to them.

Strengths and Weaknesses of the Homeless Transitions Framework

In contrast to Culhane and Kune's typology and the Clapham's (2005) housing pathways framework, the housing transitions framework has been rarely used in research on homelessness. As mentioned above McNaughton's 2008 book - *Transitions Through Homelessness: lives on the edge* – is an exception. This book makes important and original empirical, conceptual and analytical contributions to homelessness research. It also demonstrates the potential of the transitions framework to generate new insights and also to overcome some of the problems in other theoretical frameworks used to analyse homelessness. For example, detailed profiles of pathways through homelessness are likely to be even more difficult to assemble than profiles of the housing pathways of people who haven't experienced homelessness and also, for many people, homelessness is the housing manifestation of one or more 'failed transition(s)' in life. Avramov (1998) famously uses this term to describe the challenges in making the transition from living in the parental home to

living independently which often triggers the route into youth homelessness. However, the research evidence suggests that homelessness among other age groups is also often related to failed transitions - from institutional living to independent living, or from living with a partner to living alone (or vice versa) for instance. On the basis of this evidence McNaughton (2008) theorises that homelessness is likely to occur when the social, human and economic capital resources required to support a housing transition have been exhausted or cannot be relied upon.

Take, for instance, Ravenhill's (2008, p. 183) critique of the pathways approach as insufficiently flexible to take account of the non-linear nature of homelessness. The transitions approach overcomes this problem by focusing on identifiable moments of change. Transitions through homelessness are complex and not linear – a homeless person may move closer to exiting and finding a home, or to a different type or experience of homelessness, or become more deeply entrenched in homelessness. As noted by Ravenhill, these complex patterns of homelessness do not 'fit' a particular pathway or route and there is no singular explanation as to why they occur (Ravenhill, 2008). There is no expectation of forward momentum, only the acknowledgement that through our everyday existence aspects of our lives shift and change. In addition, this emphasis on transitions rather than trying to create extensive narratives of pathways over a long period is more practicable to operationalise when researching a difficult to reach group such as homeless people.

The transitions approach also has the potential to generate findings which are more relevant to homelessness policy and service design. Focusing on transitions into, through and out of homelessness, enables service providers to work with service users to explore possible actions that may trigger a transition that would have a positive impact on their lives. This may be to transition from rough sleeping to EA or a residential addiction support unit or long-term supported housing or living independently. There can be no definitive list to specify what transitions a person needs to feel safe, secure and in control of their own lives; however the ability to determine one's own narrative and make decisions is paramount in recovering from homelessness (McCulloch, 2015; McNaughton, 2008).

As discussed above, other approaches to creating frameworks for homelessness have attempted to categorise people's experiences into definitive groups. The transitions

approach also uses categories but with the expectation that these will shift and change with the population. As suggested by Somerville (2013, p. 391), this transitions framework uses time-dependent variables (length of EA use period) as well as self-reported reasons for homelessness, previous accommodation, experiences of rough sleeping and stability of service use to test the significance of these variables to the population. Age has been identified as being an important factor in the experience of homelessness (Anderson & Tulloch, 2000) and in housing transitions (Beer *et al.*, 2011). In the Pathways Approach, the focus has tended to be on young people (Somerville, 2013) whereas the transitions approach will use the span of the life course.

Using Quantitative Analysis of Administrative Data in Research on Homelessness

History, Benefits and Risks of Using Administrative Data in Research on Homelessness

Historically, the design of service provision for people who experience homelessness has largely reflected ideologies, values or, However, in more recent years there has been an increasing shift towards more evidence based practices (Wasserman & Clair, 2016). One way in which evidence has been introduced into homeless service design and monitoring is through the use of 'homeless management information systems' (HMIS) since the late 1990's (Barrow et al., 2007).

Quantitative analysis of these administrative data can provide important insights in terms of service use, such as how many people are using the service, how often they use it, the age distribution, the gender distribution, et cetera. This information can then be used in service provision planning and resource distribution. In addition, administrative data can be used in evaluation, both of service provision and policy outcomes. One model which has been evaluated multiple times using administrative data is Housing First, which has been found to have a higher success rate for client stability in accommodation (Mares et al., 2007; Pearson et al., 2009; Pearson et al., 2007) than traditional residential treatment (Tsemberis & Eisenberg, 2000; Tsemberis et al., 2004). What administrative data analysis can do in these cases is measure and compare service outcomes.

However, some researchers have raised concerns (Hoffman & Coffey, 2008; Wasserman & Clair, 2016) that on occasions the data becomes more important than the type of service being delivered. The over-emphasis on the use of HMIS systems

can however have a detrimental impact on service users (Hoffman & Coffey, 2008). It is therefore important to clearly establish how administrative data can be used appropriately in homeless service provision, policy making, evaluation and research. In other words, we need to be careful that policy makers and service providers remain focused on how outcomes are reached rather than on what the numbers look like.

A lack of quantitative research has been previously identified as one of the weaknesses in the field of homeless research (Anderson, 2001). Part, though not all, of the challenge has been the lack of large datasets which contain homeless specific data. This is changing and there is now administrative data available in Ireland through PASS, and in the USA (Wong, Culhane and Kuhn, 1997; Kuhn and Culhane, 1998), Denmark (Benjaminsen & Andrade, 2015), Canada (Aubry et al., 2013), Australia (Johnson et al., 2015) and Wales (Thomas & Mackie, 2019). As data gathering and use changes across the globe, the opportunities for research are also growing.

Very little quantitative research on homelessness has been conducted heretofore in Ireland, despite PASS being operational since 2011. Since this doctoral research project began, some other research which employs PASS data has been published, but it has primarily focused on families rather than single adults (see: Morrin and O' Donoghue Hynes, 2018; Morrin, 2019; Bairéad and Norris, 2020; Parker, 2021). To date, only one article has been published using PASS data to examine single adults' EA use (Waldron, et.al., 2019). The existence of such a rich and relatively unique data source as well as the opportunity to gain insight and new perspectives from it was the primary driver not only for the methodology used but for this research project as a whole.

The administrative data which can be collated from PASS is single source data meaning that it has not been linked with other administrative data sources controlled by the state. Internationally, some countries have utilised different administrative data sources in recent years in order to improve access to reliable quantitative analysis in homeless research. For example, in Australia, Journeys Home is a longitudinal study through which people who are homeless or at risk of homelessness are identified using the national social welfare payment service, Centerlink (Wooden et al., 2012). Research conducted in Wales has used local authority administrative data to measure homelessness in the country (Thomas & Mackie, 2020). In other parts of the United

Kingdom both homeless service data and state administrative data systems are utilised (Thomas & Mackie, 2020b). In Denmark, data is used collated from national client registration system on homeless hostels and a bi-annual count of homeless adults conducted by the Danish Centre for Social Science Research (Allen, et.al., 2020, p. 73). Research from New Zealand has used linked administrative data collated from Integrated Data Infrastructure (Pierse et al., 2019). Poland has the administrative data source, Homelessness and housing exclusion (BIWM) Data Standard (Thomas & Mackie, 2020b). In Canada, the Homelessness Individuals and Families Information System, is an administrative data system designed to collect longitudinal data from shelter users (Peressini & Engeland, 2004). In the United States, data is collected at both the state and organisational level (Thomas & Mackie, 2020b) including the use of linked administrative data (Byrne et al., 2020).

Conclusion

Although definitions of homelessness vary across time periods, jurisdictions and research, one thing remains constant, the acknowledgement that having an abode where a person can feel secure is considered to be a positive thing. Housing fulfils not only the basic need for shelter but also provides the individual with a place to belong both emotionally and societally (Arnold, 2004). Indeed, it could be argued that housing fulfils, at least in part, the three lowest levels of Maslow's hierarchy of needs, psychological, safety and love/belonging (see: Maslow, 1970). Although efforts have been made to prevent homelessness occurring in Ireland (O'Sullivan, 2020), when considered in the context of the number of people who use EA on a monthly basis (see Chapter One), it is likely that homelessness in Ireland is not being prevented so much as reallocated (Shinn et al., 2001). This reallocation does not diminish the efforts of the prevention services, especially when considering the impact on the individual for whom these services were successful. It does however highlight the fact that while the level of housing insecurity in Ireland remains high, homelessness prevention will be limited in its success.

In addition to reducing the number of people who experience homelessness, there is also the challenge of improving accommodation and services for people who are experiencing homelessness (or may do so in the future). The current style of EA frequently used for single adults (hostel accommodation) has been flagged by

numerous researchers as having a detrimental impact on the individual (Stark, 1994; Gerstel *et al.*, 1996; Dordick, 1997; Fitzpatrick, 2000; Marcus, 2003; Joniak, 2005; Marr, 2012; McMordie, 2020; Herring, 2021) while simultaneously not effectively moving them out of homelessness (Gaboardi et al., 2019; Gerstel et al., 1996; O'Sullivan, 2020; Sam Tsemberis & Henwood, 2016).

The experiences of entering and experiencing homelessness are extremely varied among individuals (Somerville, 2013), the one commonality all homeless people share being that they lack appropriate housing (Crowley, 2016). The solution to homelessness is ultimately housing, however, the type of housing and supports needed to maintain that housing are more complex (Anderson, 2001).

This literature review has reviewed the frameworks most commonly used for analysing experiences of homelessness. Both the three-part typology developed by Culhane, Kuhn and colleagues and the pathways model have contributed significant insights into the behaviour and experiences of homeless people. However, as discussed above, these frameworks also have significant weaknesses and further development of theoretical and analytical frameworks in this field is needed in order to improve our understanding of how to help people exit homelessness.

In order to contribute to filling this gap in homelessness research, this thesis draws on the theories of housing transitions over the life course (Beer *et al.*, 2011) and homeless transitions (McNaughton, 2008) to explore transitions into, through and out of homelessness in the Dublin region. This framework which will guide the analysis is set out in the next chapter, it is then applied to the analysis of the Pass Dataset in the chapters which follow. The conclusions to the thesis reflect on its usefulness in the field of homelessness research.

The depth and scope of homelessness research has vastly improved our understanding of the causes of homelessness and ways of preventing it from occurring or shortening the experience of it once it has occurred. Previous research has also provided important insights into the lived experience of homelessness and the personal impact it has had on the lives of numerous people around the world. However, researchers are quick to highlight that there are still gaps in our knowledge in specific areas, including our understanding of the service provider-service user relationship (Clapham, 2005), and the failure to use quantitative methods to explore

and test the findings from qualitative research. The analysis presented in this thesis aims to contribute to filling these gaps. Additionally, the current body of research has focused heavily on specific countries (the UK, the USA, Australia and Canada in particular), in part due to their size and international significance. The research presented in this thesis shows how findings from bigger countries apply in the context of a smaller population thus exploring whether the findings of research on these large countries are relevant to the context of a relatively small European city.

Chapter Three   Methodology

Introduction

The use of administrative data in social research is growing in popularity but not yet very widespread (Connelly, Playford, Gayle, & Dibben, 2016; Culhane, 2016). As a result, quantitative analysis approaches using administrative data to research homelessness are still in development (Connelly et al., 2016; Culhane, 2016). Administrative data brings ethical challenges that should be considered (Stiles et al., 2015) and significant constraints in terms of limitations in the information included in these databases, however it also has significant practical and ethical advantages, particularly when employed to research homelessness (Thomas & Mackie, 2019).

The methodological approach employed in this thesis builds on the work of previous research into homelessness, primarily from research on homelessness from Culhane, Kuhn and colleagues (1997; 1998; 1998), Fitzpatrick, Bramley and Johnsen (2013) and research methods from the broader social sciences (Field, 2009; Flora, 2017).

As mentioned in the Introduction to this thesis, the administrative data utilised in this research was collected from PASS, which records the use of emergency accommodation services by homeless people in Ireland. As a result, a large body of data has been collected by the DRHE which has yet to be fully utilised from a research perspective. The lack of quantitative research has been previously identified as one of the weaknesses in the field of homeless research (Anderson, 2001). This is partly due to the lack of large databases of homeless specific data. This is changing and there are now detailed data available on homeless people in Ireland through PASS and also in the USA (Kuhn & Culhane, 1998; Wong et al., 1997), Denmark (Benjaminsen & Andrade, 2015), Canada (Aubry et al., 2013), Australia (Johnson et al., 2015) and Wales (Thomas & Mackie, 2019). As homelessness data gathering and use changes across the globe, the opportunities for research are also growing.

One advantage of administrative data over surveys or qualitative research methods, such as interviews or focus groups, is that it allows for the inclusion of a much larger proportion

of, or indeed all of, the research population. Using administrative data on homeless people is also particularly useful for generating information on this often hard to reach population. This means that there is far higher representation of different experiences of homelessness in administrative datasets compared to those generated using other research methods (Williams, 2003). The unintrusive nature of secondary analysis is also an advantage when researching aspects of the lived experience of homelessness. This is particularly relevant in a small country like Ireland where vulnerable populations are at risk of being over researched without any significant impact on their circumstances occurring (Cleary et al., 2016).

The benefits and challenges of using administrative data in research will be discussed first in this chapter. This is followed by a detailed description of the data source (the PASS database of homeless emergency accommodation usage), the steps which were taken to collate the data employed in the analysis presented here, the criteria for data inclusion or exclusion and the rationale for data treatment decisions. The analytical framework which underpins the analysis is then described and a description follows of how the framework was applied in practice in the analysis. Finally, the ethical and data protection considerations associated with the use of administrative datasets such as PASS are discussed, together with the measures taken to address these in the design of this research.

Benefits and Limitations of Using the PASS Database to Research Homelessness

The analysis presented here shares the limitations inherent in analyses of EA/shelter data, including Culhane and Kuhn's research (Wong et al., 1997). These centre on the fact that only people who use EA are included in this analysis (Waldron et al., 2019). This broadly reflects the official statutory definition of homelessness in Ireland (the Housing Act, 1998 defines people without any accommodation, or with accommodation they could not reasonably remain in occupation of, as homeless). However, it does not include those living in insecure or inadequate accommodation (nor for instance those accommodated in domestic violence shelters, which are funded by central government) (O'Sullivan & Musafiri, 2018). This is significantly narrower than the definition of homelessness used in several other Western European countries (Kenna, 2011) and the very widely used

'Ethos' definition proposed by FEANTSA (2005) which represents homeless service providers in Europe. Unlike these definitions for instance, the Irish statutory definition of homelessness does not include people living in temporary, insecure or inadequate housing. In addition, so called 'hidden homelessness' because they are sleeping on friends' sofas or are in inadequate or temporary accommodation are also not included. As a result of these factors, the PASS data encompass homeless people in only the first three of the 13 types of homelessness identified in the ETHOS definition (these are: rough sleeping, staying in emergency accommodation and homeless accommodation) or what is often referred to as 'absolute homelessness' (Allen et al., 2020) (see Figure 3.1).

Figure 3.1 Irish Statutory Definition of Homelessness Compared to ETHOS Definition

Roofless
- People living rough
- People in emergency accommodation

Irish statutory definition of homelessness

Houseless
- People in accommodation for the homeless
- People in women's refuges
- People in accommodation for immigrants
- People due to be released from institutions

Insecure
- People receiving longer-term support
- People living in insecure accommodation
- People living under the threat of eviction

Inadequate
- People living under threat of violence
- People living in temporary/
- non-conventional structures
- People living in unfit housing
- People living in extreme over-crowding

A second limitation is that administrative data are collected for a different primary purpose (EA bed allocation and service provision in the case of PASS), rather than for research. This means that not all of the data required to interrogate homeless transitions has been collected on the PASS database. This is a significant issue from the perspective of the analytical framework that guides the analysis presented here which, as explained above, draws on Beer et al's (2011) and McNaughton's (2008) ideas on transitions through homelessness.

Table 3.1 Availability of data for application of Theoretical Framework Components to Analytical Framework

Framework Component	Data Availability
Beer et.al. 2011	
Stage in the life course: (age, household structure, fertility);	Age is available for all individuals in the research population. Household structure (partner, children) is available for 555 individuals (15% of research population)
Economic resources (position within the labour market, wealth, access to government assistance);	Information regarding receipt of state support (medical card, social housing tenancy, HAP). Reported income difficulties (e.g. reason for homelessness: lack of income) is available for 1,712 (47%) of the research population.
Health and well-being (presence or absence of a disability within the household);	Information regarding stays in hospital, mental health challenges, substance use challenges and physical disabilities is available for 468 (13%) of the research population.
Tenure (history of prior occupancy in one or more tenures)	Previous accommodation has been recorded for 2,548 (69%) of the research population.
Lifestyle values and aspirations (cultural norms, consumption preferences, relative significance attached to housing)	Very limited in the data, moving country has been considered for this component as different cultural experiences within the population. Citizenship information is available for 3,513 (96%) of the research population.
McNaughton 2008	
Relationships and social networks	Information regarding relationships with specific people (partner, children) is available for 555 individuals (15%) of research population. Individual reporting of challenges within specific relationships (family, parents, spouse) is available for 922 (25%) of research population.
Level of resources (economic, social, human and material capital)	Very limited in the data, reported reason for homelessness 'no income source' is available for 222 (6%) of research population.
Experiences of edgework	The examples of edgework included in this research are, engaging in rough sleeping and substance abuse. Information is available for 1,071 (29%) of research population.

Due to the limited information about single homeless people in Dublin collated on the PASS database not all aspects of the frameworks considered could be explored in this thesis and had to be adapted as a result. Table 3.1 summarises the main components of Beer and McNaughton's framework and outlies the extent to which the data required to explore these are available on the PASS database. Details of the adaptions to their

frameworks which had to be made so they could be used to guide the analysis of the PASS data on single homelessness in Dublin presented in this thesis are set later in this chapter.

A third limitation of the PASS data relates to data quality. These data are more likely to have entry errors because they were entered by multiple different individuals working for homeless service providers. In addition, many of the variables in the PASS dataset are self-reported by homeless people, including the information on their 'reason for homelessness' and 'previous accommodation'. This creates data quality challenges because there is no means of verifying the information supplied by homeless people and data analysis challenges (as detailed in the 'results' sections which follow). However, there is no means through which to analyse self-reported data in further depth than the very simplified self-reported information on PASS. It is not possible through secondary analysis of this data to explore the nuance of this information such as how people reached the stage where their reason for homelessness became a reality.

A final limitation is the population size. The number of people who use homeless services in Ireland is comparatively small compared to other countries such as the UK, the USA, Canada and Australia. The number of people in the research population in this thesis is reduced further by the decision to focus on single homeless people. This decision was made primarily because this category includes most individuals who have been identified as having the highest support needs and who use a disproportionate amount of resources according to Waldron et al.'s (2019) research on EA users in Dublin. In addition, as discussed in Chapter One, this group's EA use has increased more steadily in recent years. Despite these issues, single adults' EA use, as mentioned above, has not been frequently researched in the Irish context. Therefore, the focus on single people has the potential to generate new insights of particular value to policy makers and service providers. The research population examined in this thesis includes 3,669 people. Analysis of sub-categories of this relatively small population raises the risk that some homeless people may be identifiable which in turn raises privacy and data protection concerns. Very small sub-categories of EA have been excluded, though some sub-categories with small numbers remain.

There are a number of significant advantages to using administrative data for research on homelessness. The PASS database includes everyone who uses municipally funded EA, which is almost the entire population of EA users because non-government funded EA is rare in the Irish context (O'Sullivan, 2020). PASS is also usually up-to-date and is particularly useful when researching hard-to-reach groups such as homeless people. Commonly, shelter usage data covers only a single or small group of homeless services and may be skewed by usage patterns which are particular to certain services and not representative of all shelter users. Therefore, comprehensive coverage of this hard-to-reach population is a major benefit of this data source. Using administrative data for research, rather than surveys, interviews and other mechanisms which require the active participation of homeless people also has ethical benefits because it avoids the need for this small and vulnerable, yet very highly researched and monitored population, to provide the same information to multiple services, government agencies and researchers.

Internationally, specifically in Australia, the use of reliable data to produce robust, longitudinal research has been implemented through 'Journeys Home: A Longitudinal Study of Factors Affecting Housing Stability' (Wooden et al., 2012). In the Irish context, the DRHE has already demonstrated the possibilities of PASS being used in reporting and research as the monthly homeless statistics published by the Department of Housing, Planning and Local Government are produced by PASS (Department of Housing, 2020). As mentioned above, the DRHE research team has also published reports using PASS data, particularly on the issue of family homelessness (Morrin, 2019; Morrin & O'Donoghue Hynes, 2018). Finally, although the preceding discussion has raised data quality concerns about the self-reported nature of some of the data, this approach to data gathering also brings benefits. It enables homeless people to report their own perceptions of their situation rather than use categories imposed on them by data collators. Thus, self-reporting can generate more accurate and meaningful data and give homeless people control over their own narrative and an important 'voice' in the research process (McNaughton, 2008).

Data Gathering and Cleaning

Source of Data

The ability to gather data directly from PASS enabled the researcher to build a unique data set specifically for this thesis. It was built with the intention of using statistical models and testing including, demographic frequency statistics, cluster analysis and crosstabulation reports because, as is discussed in more detail later in this chapter, this is the most rigorous means to answer the questions listed in the introduction chapter of this thesis. This approach constitutes a very significant improvement on previous research on the PASS database which was mainly confined to the generation of frequency tables which summarise the personal characteristic of homeless emergency accommodation users and their EA usage patterns (Morrin, 2019; Morrin & O' Donoghue Hynes, 2018).

Initially it was envisaged that five years of PASS data would be examined. However, building the project specific dataset proved very time consuming, therefore for practical reasons and specifically to ensure the thesis could be finished on time it was decided to collate three years of data from PASS and to focus on the time period 2016-2018. This decision also reflected the view that generating richer data for this shorter period would be more valuable for this research than collating less detailed data for a longer time. The 2016-2018 period examined in this thesis also marks the peak of the longstanding increase in homelessness, as detailed in Chapter One, therefore this is the most pressing and relevant period to examine. In addition, the DRHE has compiled (more descriptive) reports on family homelessness spanning the same time period, which enabled comparison of the findings of this this research on single adult homelessness with the family homelessness experiences. Finally, reducing the number of years examined from five to three did not significantly diminish the comprehensiveness of the analysis of the duration of homelessness presented here because very few people remain homelessness for more than five years (Waldron et al., 2019).

Although the statutory definition of homelessness in Ireland, and therefore the scope of the PASS data examined here is narrow, these data do provide a comprehensive picture of people in Dublin who fall within this statutory definition. Persons in the Dublin region

who become homeless or are at risk of becoming homeless present to their local authority office and are registered on PASS. They receive a PASS ID and assessments of their holistic and housing needs are completed. They can apply to be put on the housing list for social housing at this time. For all those who wish to access emergency accommodation in the Dublin region there is a central placement service (CPS) phone number which they can call each day. If a bed is available, they are booked in on PASS by CPS. If no bed is available, the individual will be offered a sleeping bag and informed of night services such as Merchants Quay Night Café. Once the individual presents to the service provider their status on PASS is logged as 'Arrived'. When the individual leaves emergency accommodation their status is changed to 'Discharged'. The PASS ID also allows people to access other services (support services, addiction support) under one profile rather than having multiple services with duplicate information. PASS allows service providers to keep notes concerning client engagement and care.

In this research only single adults in the Dublin region who first presented to emergency accommodation between January 2016 and December 2018 are examined. Single adults are defined in this thesis as adults who access emergency accommodation either as an individual or in a couple not accompanied by minors and not part of a larger family unit. Adults who were part of a family unit and adults who booked accommodation but have never used an allocated bed have been excluded from the project data. The PASS data also includes information on rough sleepers whose status has been confirmed using the bi-annual rough sleeper count for the region (DRHE, various years). Individuals who first came into contact with the Housing First team and received services through that team have also been included in this thesis.

Departures from EA for this group have been recorded up to the 31st of March 2019. The single adults who used emergency accommodation during the week starting the 25th of March 2019 have been considered to be still experiencing homelessness within the analysis for this report. These individuals can be divided into two groups. The first group is single adults who used emergency accommodation for one or more nights during the week starting the 25th of March 2019 but had not stayed in emergency accommodation on every night of that week (n= 263). The second group is single adults who have a long-

term bed in emergency accommodation (n= 870). These long-term beds can be assigned for a pre-determined length of time (e.g. six months) or on a rolling basis depending on the service users' need and engagement with the service.

Data Collation and Selection of Variables and Cases

The data employed in this thesis was collated from PASS between September 2018 and December 2019 and then transferred to statistical analysis software (SPSS). For data protection reasons the data collation was conducted in the DHRE's offices where space was provided for the researcher to work for this period.

The first step in the data collation process was to identify individual EA users to be included in the data set. Specific criteria were established for this process – the individuals included should be single adults who first presented to emergency accommodation in the Dublin region between January 2016 and December 2018. Single adults are defined in this thesis as adults who access emergency accommodation either as an individual or in a couple who are not accompanied by minors and are not part of a larger family unit. Adults who were part of a family unit and adults who booked accommodation but have never used an allocated bed have been excluded from the data analysis.

The proposal for this thesis envisaged that the researcher would generate data on the following variables: name; date of birth; current address; gender; outreach actions; PPS number; accommodation/homelessness status; family and current relationships; early life experience/childhood; education; work and job training; legal issues/offending behaviour; income and finance; general physical health; mental health issues; alcohol use; drug use; and independent living skills. However, following initial data analysis and discussions with the DRHE research team it became clear that data on some of these variables were not available or were available for only a small number of EA users. Therefore, the list of variables was revised as shown on Table 3.2 below. Once the variables for inclusion in the dataset had been decided on and the criteria for selecting cases for inclusion established, the time-consuming process of data collation, anonymisation, cleaning and quality assurance began. This encompassed the following steps:

Step 1. *Collation of Master List of Potential Cases*: The PASS system enables the generation of reports which provide specific, pre-defined information. The researcher

generated a report of this type for new presentations to emergency accommodation in the Dublin region (individuals who had not previously presented to emergency accommodation) for each month from January 2016 until December 2018 (n = 10,283).

Step 2.   *Exclusion of Inappropriately Categorised Cases*: This master list was then compared to a list of first presentations for families to EA between 2016 and 2018 which was provided by the Dublin Region Homeless Executive. The PASS ID's which appeared on both lists were excluded as they did not fit the criteria for this research (n = 4,014). The remaining 6,269 cases were examined individually as described in step 3. Additional cases were excluded during later phases of the data collation when examination of specific cases revealed that they did not meet the criteria for inclusion. The reasons for exclusion of cases included:

    a. had only been homeless in another region and not in Dublin (n = 149).

    b. the individuals had never physically presented to emergency accommodation (n= 196).

    c. they had entered homelessness prior to 2016 (n= 33).

    d. Inaccurate date of birth (n= 2).

    e. duplicate PASS ID (n= 2).

    f. they were part of a family unit (n= 1,468), and

    g. they had no valid PASS ID (n= 125).

Further details of the reasons why these cases were excluded are provided in Appendix One to this thesis.

Step 3.   *Collation of Variables for Each Case:* Information was collated on each of the selected variables for all cases in the research population. This was done by examining the PASS accounts for each case. The process of account checking was a time consuming one. Each unique PASS ID is associated with an individual account. These accounts are updated based on the account holder's emergency accommodation and other service usage. PASS is primarily used as an emergency accommodation booking and management system, however it is not its only use, as key worker/ client meetings, case notes, departures and post-departure support can all be logged on the system. The researcher utilised all available information in order

to include as many data points for each individual as possible. In some cases, this involved reading hundreds of pages of case notes spanning the entire three-year period included in this research. The inclusion of information from case notes improved the overall quality of the data collected but it was also the most time-consuming task within this phase with complicated cases taking as long as 45 minutes to complete data entry for. Case notes were coded by identifying information which corresponded to specified variables. For example, if case notes included information regarding a hospital stay the 'break in EA use: hospital' variable was coded as '1' ('yes') as opposed to '0' (no).

Step 4.   *Exclusion of Cases Where Permission had been Refused for Data Re-analysis*:   Consent for sharing of their data was gathered from each client when they first presented as homeless and were registered on PASS. Those who did not consent to data-sharing are excluded from the analysis presented here. Of the 6,269 PASS accounts examined, 594 did not consent to their data being shared. Therefore, information on these 594 individuals is not included in the analysis stages.

Step 5.   *Data anonymisation:* Once the variable information for each case had been collected and collated into a single data set, double anonymisation was conducted. The first stage of this process was already complete as personal identification is only possible using a PASS ID when an individual provides it. This means that, for the researcher, this information was already anonymous as names were not recorded. To ensure that the researcher could not link a PASS ID back to an individual in the future a new number was assigned to each case. Two Excel documents were then created, the first of which remains on the DRHE network and incudes all the information extracted for the purposes of this research as well as the original PASS IDs linked to the new ID numbers assigned in the double anonymisation process. The second includes only the new ID numbers and was extracted from the DRHE network to the researcher's computer via password protected email. This dataset has been used on the researcher's computer for the purposes of this thesis.

Step 6.   *Review of Variable Quality and Suitability:*   During the data collation, variable quality and suitability was reviewed on an ongoing basis. With this in mind a decision was made to add additional variables to the dataset. The additional variables

added at this stage are listed in Table 3.2. Further additional variables added for specific analytical stages are included in the empirical chapters which follow.

Step 7.   *Combining and Summarising Variables:* Three of the PASS variables included in the initial data collation phase were found on further examination to be unsuitable as stand-alone variables or for reporting in detail. Examination of the country-of-origin data revealed that tiny minority of EA users came from certain countries and therefore including this information in the analysis risked identifying them and therefore breaching confidentiality and data protection requirements. In the empirical chapters specific country of origin is not included, however if a person has moved to Ireland from another country this information has been included. Analysis of PASS data relating to the 'previously in care' variable, and comparison with other research and data on children in care in Ireland revealed that the PASS data on this issue appears to greatly underestimate the number of homeless individuals who had been placed in state care prior to their 18th birthday and is therefore probably not entirely reliable. Therefore, this information was bundled together with information on other institutional care (prison and psychiatric) to create a single variable: 'institutional care'. It is important to acknowledge that homeless people's experience of these other forms of institutional care may also have been underreported within PASS. The third PASS variable found to be unsuitable for inclusion in its original form was 'unaccompanying children under 18'. 'Unaccompanying children' refers to children who had not accompanied their parent(s) into EA. This variable was self-reported and from case notes it was clear that not all unaccompanying children had been included. As in the case of the 'previously in care' variable, it was considered important to include this information when it had been reported. In order to do this, when people reported having children this was counted as a contributory event in the category 'life events'.

Step 8.   *Data quality assurance:* Once the data set was complete and the variables had been selected the data was opened using SPSS. The first step was to run frequency tables for all variables to ensure answers had been correctly recorded for each case. Where cases included invalid information, it was corrected using PASS. If

the information on PASS was found to be incorrect the DRHE was informed, and the case was removed from the dataset.

Full details of the variables which were included in the dataset at the end of this process and the values associated with each one are set out in Table 3.2 below.

Table 3.2: Definition of Research Variables

Variable	Definition
Date of birth	This information has been used to calculate the age of each individual on the day they first presented to EA.
Gender	Only two genders are listed on PASS. This is in line with other state data collection in Ireland
Ethnicity	Available answers for this variable: White Irish; White EU; White Non-EU; Irish Traveller; Black Irish; Black EU; Black Non-EU; Asian; Other.
Citizenship	Available answers for this variable: Irish, EU, Non-EU and unknown.
Country of origin	This variable allows self-reported answers to be included. In total, single adults who used EA during the time period considered in this research originated from one of 102 countries.
Partner	EA clients can be linked to each other in PASS, which is particularly important for those who wish to be accommodated together. This variable is more commonly used for families but in the single population it was still considered important to log and analyse this information. It has been decided to only include couples in this variable rather than other family members (parents, children over the age of 18) who were also using emergency accommodation during the period under analysis.
Local Authority	The city or county council in which the individual was first registered as homeless.
AHN completed	The Assessment of Housing Needs is completed when people first present as homeless.
Previous accommodation type	This variable allows self-reported answers to be included. A total of 18 different accommodation types have been recorded.
Reason for homelessness	This variable allows self-reported answers to be included. A total of 40 reasons have been recorded.
Children (non-accompanying)	This variable allows self-reported answers to be included.
Date of first presentation	This is the date an individual first presented to EA.
Accommodation Status	This variable is filled in by service provider employees such as key workers or local authority employees such as members of the Homeless HAP Team. Initially the options used for this variable were the same as for family data, which were: in emergency accommodation; HAP tenancy; local authority housing; approved

	housing body social housing; returned to family/friends; and private accommodation. However, as the process has continued it has become clear that additional options needed to be added to this variable. The additional options are: placed in a long-term bed; in EA one night only bed; Long-Term Accommodation (including drug and alcohol treatment facilities); prison; and deceased. In total, there were 19 status types recorded in this research.
Departure/Exit date	The date on which an individual ceases to use EA. This variable contains multiple options grouped under two categories: **Exit**: a person has exited to a tenancy and the accommodation moved to has been officially recorded on PASS, or **Departure**: the individual ceased using emergency accommodation for a reason other than moving to secure accommodation.
Still Active	When an individual used homeless accommodation the week ending 31/03/2019. Individuals to whom this variable applies have been grouped into two categories: • **Placed**: has accessed a long-term bed or a rolling bed (a bed in emergency accommodation provided to the same individual nightly without time restrictions) on or before 31 March 2019, or • **Active**: used emergency accommodation during the week starting 25 March 2019.
Medical card	This indicates that the individual has some additional supports beyond homeless services and can access health services if necessary.
History of care	This is a drop-down option with the default setting being 'no'.
Rough sleeper	This variable contains data collected during the bi-annual rough sleeper counts conducted by the DRHE and case notes inputted by the Housing First Street Team.
Consent	This variable contains three options: consent given; consent not given; unable to consent.
New Variables Created from PASS Variables	
Length of Time in EA	
Age at first presentation	Calculated using DOB and date of first presentation to EA.
Age at departure	Calculated using DOB and departure date.
LTB arrival date	For those placed in long-term beds.
Only EA service used	For those placed in long-term beds.
Receiving ongoing support	Includes SLÍ (discussed in Chapter Two) or Housing First
Excluded from service	When an individual has been barred from a specific EA for a specified period of time (from a one-night exclusion to being permanently barred).
Previous Departures	A departure has been counted when EA use stopped for a period of time and an explanation as to where they were staying had been provided. This information often came from case notes but on occasion a person may have entered a tenancy which was registered

	on PASS. Previous Departures include: prison, hospital, residential treatment, family/friends and tenancy.
Occupancy Rate	This variable was created using a PASS report for bed occupancy over a given time period (day/week/month). The research ran the report for each month from January 2016 – March 2019 indicating individuals who had a 95% bed occupancy rate. The 95% occupancy rate was chosen because if an individual uses EA for less than 95% of a month, the DRHE consider it to be a break in service use. In addition, the 95% occupancy rate allowed this research to examine much smaller breaks in service use when comparing to the three-part typology.
Life Events	This variable includes those who have had children, moved country or region and have been/are in a relationship recorded on PASS
Homeless Events	This variable includes those who experienced homelessness prior to entering EA in the Dublin region between 2016-2018. These experiences include, being homeless in another region, reporting (through case notes) experiences of homelessness as a child or hidden homelessness (sofa surfing, squatting).
Health Events	This variable includes those who reported challenges with addiction or mental health. It includes recorded stays in hospital, mental health facilities and addiction treatment facilities.
Institutional Events	This variable includes reports of living in care or being incarcerated.

Analytical Framework

As discussed above, the limitations of the PASS administrative dataset utilised in this thesis, particularly in terms of the type of information it contains, has implications for the analytical framework used to guide the analysis. This framework draws on Beer, Faulkner, Paris and Clower's (2011) analysis of housing transitions and McNaughton's (2008) ideas on homeless transitions. However, the PASS dataset does not contain all of the information required to explore all aspects of these frameworks, therefore they had to be adapted for the purposes of this study. This process of adapting Beer, et al's (2011) and McNaughton's (2008) frameworks for application to the examination of transitions among single homeless people in Dublin also took account of the most significant critiques of the literature on homelessness as discussed in Chapter Two.

The preceding chapter discussed how the housing Pathways Approach, devised by David Clapham became popular among homelessness researchers in the late 1990's and early 2000's (Clapham, 2005). While the Pathways Approach has provided some valuable insights into the experience of homelessness, the preceding chapter has also highlighted some key practical and analytical challenges related to its application to the study of homelessness.

To address these shortcomings, this thesis draws on another theoretical framework which is rooted in the housing careers literature – that of housing transitions. This framework is also adapted to address the shortcomings outlined in the preceding chapter and also reflect the particular nature of homelessness transitions in Dublin as opposed to the housing transitions examined in Beer, Faulkner, Paris and Clower's (2011) comprehensive text on this approach - *Housing Transitions Through the Life Course*. Particular attention has been paid in this thesis to the five dominant housing dimensions identified by Beer and colleagues:

- 'stage in the life course: (age, household structure, fertility);
- economic resources (position within the labour market, wealth, access to government assistance);
- health and well-being (presence or absence of a disability within the household);
- tenure (history of prior occupancy in one or more tenures); and
- lifestyle values and aspirations (cultural norms, consumption preferences, relative significance attached to housing) (Beer *et al.*, 2011: 31).

Carol McNaughton's (2008) book, *Transitions Through Homelessness: lives on the edge* is one of the few examples of research which applies the concept of transitions to homelessness. Her analysis draws on interviews conducted with 28 people over the course of a year, which examined their transitions into and through homelessness. She argues that:

> transitional events over the life course, where the 'plot' of someone's life is changing, are important to explore in this way how people attempt to maintain their ontological security, their sense of identity, and how their actions may affect the transitions they make, can be better understood (McNaughton, 2008: 48).

Research participants were asked to identify their reasons for homelessness which they gave as 'alcohol use (5); drug use (4); domestic violence (4); breakdown of family or couple relationship (6); bereavement (3); mental illness (2); leaving care with nowhere else to go (2); debt (1), and leaving poor quality housing (1)' (McNaughton, 2008:55). Her interviews with homeless people also revealed that becoming homeless was often the outcome of a sudden or traumatic experience which caused the individual to leave their previous accommodation.

On the basis of this empirical evidence McNaughton (2008: vii) proffers the concept of 'integrative passages' which refers to 'transitional stages that maintain an individual's integration to society over their life course' and mean in practice that 'they adhere to the norms of society such as moving from the parental home to student accommodation'. Homelessness is likely to occur when the social, personal and economic capital required to support an integrative passage has been exhausted or cannot be relied upon. McNaughton's research identifies three key factors as particularly crucial in this regard, these are: '1. Relationships and social networks; 2. Level of resources (economic, social, human and material capital); and 3. Experiences of edgework' (McNaughton, 2008: 63). McNaughton (2008: VII) uses the concept of edgework to refer to 'actions and events that involve negotiating at the edge of normative behaviour' and involve 'voluntary and non-voluntary risks that require people to negotiate difficult circumstances', including drug use, violence and suicide attempts. Therefore her use of the concept differs from Lyng's (2005) original work on this issue which focused on voluntary risk taking.

Both McNaughton's (2008) and Beer *et al's* (2011) concepts of transitions provide interesting and relevant ideas which might be applied through analysis with the data collected for this thesis. However, each concept, while intriguing, has gaps in its applicability to homelessness. Beer and colleagues' work contains important observations relating to how need and preferences for housing changes over the life course. But their analysis is not applied to homelessness nor to the type of quantitative data analysis conducted in this thesis. McNaughton's (2008) work presents excellent insights into the transitions into and through homelessness as well as the contributory factors which impacted those transitions. Nonetheless, being qualitative research, the

study was relatively small when compared to the number of cases included in this research.

The first stage of the adaptation process was to modify Beer et al.'s (2011) dimensions which shape housing decisions with reference to the key factors ('1. Relationships and social networks; 2. Level of resources (economic, social, human and material capital); and 3. Experiences of edgework') identified by McNaughton (2008: 63). As explained above, the tendency for transitions to occur at different times during the life course is core to the idea of housing and homeless transitions. Age has also been identified as a key influence on both the risk and experience of homelessness by numerous researchers (e.g. Kuhn and Culhane, 1998; Fitzpatrick, 2000; Warnes and Crane, 2006; Aubry, Klodawsky and Coulombe, 2012; Mayock and Corr, 2013). In this thesis life course related variations are examined using the most common housing life phases identified in Beer *et al.'s* transitions (2011). These are: younger adults (between ages 18 and 34); middle-aged adults (ages 35-54) and older adults (age 55+). The research population are assigned to these phases according to the relevant individual's age on the first night s/he spent in EA as a single adult.

Finally, like McNaughton (2008), the analysis presented here examines homeless people's self-reported reasons for homelessness. McNaughton's concepts of edgework, 'integrative passages' and the impact of social, personal and economic capital on homelessness and Beer *et al*'s (2011) ideas on the 'dimensions' of life which shape housing transitions are also drawn upon in the analysis of key socio-economic, demographic and personal factors which influence the transitions into emergency accommodation in Dublin presented here. This analysis categorises homeless people's self-reported experiences into four types of 'contributory events' and explores their influence on homeless transitions over the life course. These events are:

- **Homeless Events**: people who previously experienced homelessness prior to 2016 (usually in a different region of Ireland or as part of a homeless family). People who have engaged in rough sleeping prior to entering EA.
- **Health Events**: people who have experienced mental health or addiction issues. People who have spent time in rehab facilities or hospital.

- **Life Events**: people who have children. People who have a partner who is also registered on PASS. People who have moved to Ireland from another country.
- **Institutional Events**: people who have lived in institutional facilities, including prison and foster or residential care for children.

The importance of additional factors and experiences beyond a housing need in relation to precipitating homelessness is established by homeless researchers (Anderson & Christian, 2003; Bramley & Fitzpatrick, 2018; Chamberlain & Johnson, 2013; Fitzpatrick et al., 2013; Fitzpatrick, 2005; Johnson et al., 2008). Although not all the contributory events identified in this research have been reported as the reasons for homelessness, the clear correlation between contributory events and becoming homeless cannot be ignored. The analysis presented in the following empirical chapters shows that these events are experienced, sometimes multiple times, by the research population.

While this thesis examines transitions into, through and out of homelessness in the empirical research chapters, the extent to which these transitions can be examined here is limited due to the nature of the data. As shown later in this chapter, when data is available, transitions into, through and out of homelessness can be identified however there are likely to be additional factors which cannot be examined in this thesis. This thesis will identify general groups of transitions but does not claim that every possible transition is included. It also does not link transitions: how one person transitions into homelessness does not predetermine how they will transition through or out of homelessness. These are, essentially, standalone events which indicate a change in circumstances which will shift the balance between what resources a person has and what they need. By excluding presumed links between transition types, this approach avoids the assumption sometimes made in the Pathways Approach that how a person moves through homelessness is 'set' based on their pathway (McCulloch, 2015). Research, understandably, has tended to focus on those who struggle in their experience of homelessness. However, as will be discussed in later chapters, many people need very little support to trigger desired transitions such as finding new accommodation. Taking a quantitative approach to transitions research allows this thesis to include the transitions of people with low support needs without additional requirements being placed on the individual, while still recognising their experience as a valid one. In addition to this, the

proposed approach moves away from language such as 'pathways' or 'careers' which as metaphors may serve to soften or romanticise the experience of homelessness (Fopp, 2009). The approach used in this thesis has no expectation of what will be or should be, instead it examines what transitions have occurred for people in the past, and through analysis of those transitions, shows common risk factors or successful interventions which can be applied at a practical level in relation to current or future service users.

Service Use Typologies

The analysis presented in this thesis also draws on Culhane, Kuhn and colleagues' landmark three-part typology of shelter usage when examining patterns of EA use in the Dublin region. The decision to draw on this analytical framework reflects three considerations. Firstly, as discussed in Chapter Two, the work by these academics has been highly influential in the field of homelessness research, specifically in terms of using administrative data. Secondly, as with Culhane, Kuhn and colleagues, the data examined in this thesis relates to homeless shelter usage (although this term is not used in Ireland). Thirdly, this service use typology is useful for understanding how many people used the service over a period of time, how long they used the service for and how frequently (or consistently) they used the service is important in the context of transitions through homelessness. In relation to counting 'who is homeless', taking a time period approach gives a far better idea of the number of people using EA than a point in time or single night analysis. This has been succinctly explained by Shinn and Weitzman (1996: 110):

> Homelessness is more like a river than a lake. Most people do not stay homeless forever; on any given day, some find housing and others become homeless. Thus, far more people are homeless over an extended period of time than on any given night. To estimate the number of people homeless over a period of time, we must examine both the capacity of the river and its speed of flow.

In order to address the weaknesses in Culhane and Kuhn's (1998) three-part typology adaptations have been made to their methodological approach. The first is removing the 30 day break they use to define episodic homelessness and instead using a service use consistency variable. By considered consistency of service use as opposed to large

breaks in service use, more subtle patterns can be determined within EA use which Culhane and Kuhn's typology may be unable to capture. Cluster analysis will be used (discussed in more detail later in this chapter) to determine if the same three categories of service use found by Culhane and Kuhn (1998) will emerge when consistency of EA is used in place of the 30-day break. These clusters will be examined in detail using demographic variables for the research population (see Chapter Four). How consistently people use EA will be considered in relation to broader housing careers by examining accommodation types the research population lived in prior to homelessness and their reasons for homelessness (see Chapter Six). Departures from EA will also be examined in relation to consistency of EA service use (see Chapter Seven) to determine if there are any connections between these two aspects of homelessness.

Data Analysis

The aims and objectives of this thesis underpinned the direction chosen for the data analysis stage of this research. As detailed in the introduction to the thesis these objectives are to explore the whether it is possible to identify transitions into, through and out of homelessness using PASS data; if these transitions changed over the life course and to explore alternative typologies of homelessness which could enable richer understanding of singe adults EA service use.

The statistical tests and modelling techniques included in this thesis are descriptive analysis, cluster analysis, crosstabulations and significance testing. These were chosen based on previous research conducted in the field, such as Culhane and Kuhn's (1998) model which was created using cluster analysis and previous research conducted on the PASS database in Dublin - specifically research on family homelessness written by Holly Morrin in 2018 and 2019 which used descriptive analysis to examine family homelessness using PASS data. Significance testing on crosstabulations have also been applied previously using PASS data by Waldron et.al (2019) specifically using the Cramer's V test. Given that there was previous research using similar or the same data which had successfully produced informative results, these techniques were employed in this thesis and have been adapted to address the aims and objectives set out in the introduction.

The variables were selected with reference to examining the aims and objectives of this thesis and the variables available. The demographic variables chosen were age, gender and citizenship. Citizenship was chosen over ethnicity or country of origin as it grouped people together in larger groups thus making both frequency and significance testing more reliable and increasing the amount of information which could be reported in this thesis. Is ethnicity or country of origin had been chosen, many of the crosstabulation results would have been 0% thus either providing no new information or risk the implication that specific experiences are not applicable to a group when it reality it may be the number of people included that is impacting the result. Age in the form of age cohort was selected as the primary variable included in all stages of analysis as it is a key component of the aims and objectives of this thesis. Transition variables were selected for each of the transition stages in order to identify how transitions were experienced by the research population. The entry transition variables selected are reason for homelessness and previous accommodation. The through transition variables selected are time and consistency cluster (created using cluster analysis) and breaks in EA use. The exit transition variables selected are departure accommodation, still using EA, support after leaving EA and long-term bed occupancy.

Descriptive Analysis

In order to achieve the aims of this thesis to enumerate and identify the demographic characteristics of this population, the process of analysing EA usage in the Dublin Region between 2016 and 2018 commenced with descriptive analysis of these data. The results of these descriptive statistics have been presented throughout the following chapters as tables and graphs and focused on identifying the demographic characteristics of the individuals included in the data set.

Initially, frequency tables were generated for each of the demographic variables (age, gender, ethnicity and citizenship). During this stage, relevant variables (previously in care, previously in prison, previously in hospital, migrated from another country, moved LA region, in a relationship, had children) were used to address the research aim to identify the extent to which relevant personal histories of this population have been recorded in PASS. Further descriptive analysis of these variables was conducted using crosstabs in

order to demonstrate variations in distribution across demographic variables depending on the second variable used.

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Cluster Analysis

One of the aims of this thesis it to identify patterns of EA usage among this population specifically in terms of entries into EA, service use time period and exits from EA. Following the methodology used by Kuhn & Culhane (1998) cluster analysis was used to interrogate the dataset based on a continuous variable (EA use period: days) and the categorical variable (EA Stability). The latter variable was created specifically for the use in this cluster analysis. This variable was made by comparing each individual's 'occupancy rate' with 'EA use period: months'. These variables were used to calculate the percentage of months in which EA use was stable. Stable use was defined as 95%+ EA bed use per month. This specific measure was selected to allow some leeway in the case of data entry errors or short stays away from EA for reasons such as medical treatment or family visits. The resulting stability categories were:

1. Stable use over all months used (97-100%).
2. Stable use over most months used (60-96%).
3. Stable use for half the months used (40-59%).
4. Inconsistent use for most months used (1-39%).
5. Inconsistent use for all months used (0%).
6. used EA for <30 days.

Months where a person entered or departed EA have not been included except for the <30-day group. With the exception of the <30-day group, these categories are not dependent on the length of time spent in EA. These two variables were clustered using two-step cluster analysis in SPSS.

Crosstabulation and Statistical Significance Tests

One of the aims of this thesis is to identify the demographic characteristics of the EA using population in Dublin and to assess whether these are associated with different patterns of EA usage.

Pearson's Two Tailed tests were run using four demographic variables age, age group (younger adults, middle-aged adults, older adults), gender and citizenship in combination with the variables identified for each transitions stage. Full details of these tests are set out in Appendix Two. Each of the demographic variables selected were tested separately for transitions into EA (reason for homelessness and previous accommodation); transitions through EA (time and consistency cluster and breaks in EA use); transitions out of EA (support after leaving EA, AHN, Long Term Bed Occupancy, Still Using EA and Departure Accommodation), and experiences of contributory events prior to and/or during EA use period. Peason's Two Tailed tests showed correlation between age and gender. Further exploration found that adults aged 18-25 were more likely to be female (29%) whereas adults aged 46-55 were most likely to be male (86%).

Correlations were found between gender and the entry transition variable reason for homelessness and relationship with the exit transitions variable departure accommodation. Correlation was also found between gender and pre-EA institutional contributory events and health contributory events. Citizenship (Irish, EU, Non-EU) was also tested for significance in relation to the transition stage variables. Citizenship had

correlation with the entry transition variable previous accommodation, the through transition variable time and consistency cluster and the exit transition variables AHN, departure accommodation, support after leaving EA. Correlation was found between citizenship an institutional, health, life and multiple contributory events both before and during EA use.

Age was identified in multiple Peason's Two Tailed tests as being significant with variables identified as being indicators of homeless transitions. Specifically, correlations were found between age and the entry transitions variable previous accommodation, the through transition variable time and consistency cluster, and the exit transition variables support after leaving EA, long term bed use, still using EA and departure accommodation. Correlations were found between age and pre- EA institutional events contributory events. There was correlation between age groups and all contributory events considered. These variables had been identified as being associated with different patterns of EA usage and therefore age was considered an appropriate variable with which to direct the analysis. Following this, Chi-Squared tests were conducted to examine the statistical significance of relationships of interest identified by the Pearson's Two Tailed tests. For Chi-Squared, Cramer's V the confidence level (p-value) indicates the likelihood of getting a result if the variables have no effect on each other (Field, 2009; Rea & Parker, 2014). As Cramer's V is measured between 0 and one, a relationship is considered to be strong if ≥ 0.60, relatively strong between >0.40 and <0.60, moderate is between >0.20 and <0.40 and weak if ≤0.20 (Field, 2009; Rea & Parker, 2014). The confidence level considered acceptable in this analysis is ≤0.05, meaning that there if there is less than a 5% chance that we get a result without the effect existing, we cannot reject the null hypothesis of each analysis stage (Field, 2009).

Although insufficient correlations between the demographic variables 'gender' and 'citizenship' and to EA experience variables were identified, they are considered to hold interesting and relevant information which provides important context for the research and valuable insight from a service provider and policy maker perspective. They have also been considered useful in identifying patterns of service use in line with the aims of this thesis. These variables have therefore been reported for each of the transition stages in

this thesis in relation to the age cohorts, younger adults, middle-aged adults and older adults. As shown on Table 3.2, the 'unknown' category for citizenship is extremely small (n=156) and has therefore not been included in future tables in this thesis.

Table 3.3 Age Groups, Gender and Citizenship[1]

	Gender		Citizenship				Total
	Female	**Male**	**Irish**	**EU**	**Non-EU**	**Unknown**	
Younger Adults	54%	42%	45%	38%	49%	44%	44%
Middle-Aged Adults	33%	47%	43%	49%	42%	44%	44%
Older Adults	14%	12%	12%	13%	10%	12%	12%
Total	746	2923	2349	682	482	156	3669

Note: 1. Source: PASS data compiled by author.

Applying the Analytical Framework

The three transitional stages, into, through and out of EA, were examined separately and the results of this analysis presented in Chapters Five, Six and Seven. While elements of the analysis changed for each transition type, the analysis framework remained similar. Each transitions analysis contains Beers et al.'s age categories which were used to create a new age variable call 'Age Cohort' which contained three age groups; younger adults (18-34); middle-aged adults (35-54); and older adults (55+). Crosstabulations, including Chi-Squared and Cramer's V tests were run as part of the crosstabulations between age groups and variables relevant to the transition type. Crosstabulations where the number of cells with a count less than 5 exceeds 20% have not been reported.

Ethical and Data Protection Considerations

The reuse of administrative data for research raises critical ethical issues and associated data protection challenges. One of the primary considerations of this research was the issue of identifiability of individuals. As Ireland has a small population, any sub-population studied will also be small. Those who have used EA in the Dublin region during the time period considered combine being a relatively small group with having very specific inclusion criteria making the risk of identifiability quite high. In order to address this risk,

any variables which were considered to have the potential to identify EA clients (such as country of origin) were removed from the analysis or just reported in summary form.

In order to ensure that the appropriate ethical and data protections were employed in this research, full ethical approval was applied for and granted by the UCD research ethics committee prior to the data collation stage commencing. In addition, a data access and sharing agreement was drawn up and signed by representatives from University College Dublin and the Dublin Region Homeless Executive. The researcher signed a confidentiality agreement with the DRHE not to share privileged information outside of the scope of the data access and sharing agreement.

This is a cautious approach to this particular risk, but the researcher considered ensuring anonymity to be crucial out of respect for and due to the limitations of consent for this group. In order to access EA an individual must be registered on PASS. This means providing personal information which is not normally requested from people who are not homelessness. While people can and do refuse to have detailed information about their case stored on PASS and/or choose not to have these data made available for re-analysis, it is a relatively small number that do so. Furthermore, all EA users are vulnerable which raises questions as to whether their consent for re-use of their data for research can be fully informed.

Secondary analysis of administrative data on homelessness people does have some inherent ethical benefits, however. It enables unintrusive research on this vulnerable population.   Homelessness has become a 'hot topic' in Ireland recent years and as a result the amount of research conducted on the issue and this population has increased rapidly. Most of this research (with the exception of reports published by state agencies) has been qualitative or mixed methods. While these research methods have provided important insights into the lived experience of homelessness, there is a risk of the population being over researched at the individual level.

Conclusion

Administrative data reanalysis brings huge opportunities for research but also significant challenges (Connelly et al., 2016; Culhane, 2016). As discussed above, one of the most

time-consuming elements of the research for this thesis was the data collation stage. This was because the PASS database was not developed with research in mind but rather as an EA bed management system. Ideally future systems will be designed with research in mind and build in data extraction tools that overcome this issue. A new version 'PASS 2' was in development during the data collation phase of this doctoral research which promises to make data extraction easier but was not launched in time to be used for this project.

The PASS data does show the potential of using administrative data for research on homelessness. It is (once gathered) reasonably consistent across individual accounts. It also allows for varying degrees of detail, from those who do not consent to data sharing having only minimal information stored, to those who have been highly engaged with services having vast amounts of detail recorded. The inclusion of open questions which facilitate self-reported answers is also a very positive aspect of the system. The varying levels of information recorded, including the self-reported answers, created a much richer data set that allowed this thesis better to demonstrate the diversity among single adults' experiences of homelessness. As discussed in Chapter Three, agency (Long, 1992) and self-narrative (McNaughton, 2008; McCulloch, 2015) have been found to be important issues for those who experience homelessness. Self-reported information within the empirical chapters of this thesis has been included, in part, as recognition of these issues.

The analytical framework, while derived from other frameworks (specifically from the work McNaughton, 2008 and Beer *et al.*, 2011), does include some new and innovative elements. The need for this innovation was driven by the data and the specific topic under investigation and shortcomings in existing literature on housing and homelessness transitions as identified in the preceding chapter. This framework will be applied and thereby tested in the chapters which follow.

Ethical and data protection challenges are inherent to research which reanalyses administrative data on homeless people (Stiles et al., 2015). Therefore, these issues are central considerations in the design of this research. This thesis demonstrates that even in a small country like Ireland, quantitative research can be conducted ethically with due consideration of the risk of identifiability. The ethical advantages in terms of secondary

use of administrative data far outweigh the risks. There are two primary advantages to using this approach in homelessness research, the first being that an entire population may potentially be included. The second is that there is no additional input or effort required by participants in order for the researcher to gain new insights and understanding about the experience of homelessness.

All research methods, quantitative, qualitative or mixed, have strengths and limitations. Each researcher must select the most appropriate method to interrogate the research data as robustly as possible. In addition to this, as a doctoral thesis, this research aims to contribute to knowledge in the field of study – in this case homelessness. By using a unique administrative dataset on single homeless people in Dublin, this thesis will make an important empirical contribution to knowledge in the field. By adapting the concept of housing transitions to devise a new and innovative analytical framework to examine homeless pathways, this thesis will also make an important theoretical and conceptual contribution to the literature on homelessness.

Chapter Four   Homeless Typologies

Introduction

This chapter presents an analysis of emergency accommodation usage data for the research population. One of the aims of this thesis is to establish if Culhane, Kuhn and colleagues' typologies of transitional, episodic and chronic homelessness are the 'best fit' for the research population. The objective of this exercise is not primarily to examine trends in shelter usage in this city or the characteristics of residents, because these issues have already been researched extensively (see: Morrin, 2019; Waldron et al., 2019). Rather, it aims to employ this analysis to reflect on, test and critique the use of shelter data in research on homelessness heretofore in Ireland and internationally.

The chapter focuses in particular on Dennis Culhane and Randall Kuhn's ground-breaking analysis of data on single adult users of homeless shelters in New York and Philadelphia, which is set out and developed in two articles (Culhane and Kuhn, 1998; Kuhn and Culhane, 1998) and was summarised and critiqued in Chapter Two. The typology of three typical patterns of homeless shelter usage - transitional, episodic and chronic homelessness - which they produced on the basis of this analysis has been enormously influential in the literature on homelessness (Lee, Tyler, & Wright, 2010). It has been tested using data on homeless shelter usage in Canada (Aubry, Farrell, Hwang, & Calhoun, 2013), Denmark (Benjaminsen & Andrade, 2015) and Ireland (Waldron et al., 2019) and applied to the study of homelessness among families (Wong, Culhane and Kuhn, 1997; Culhane, Metraux, Park, Schretzman, & Valente, 2007; Parker, 2021). Furthermore, each of the three categories it identifies has been researched in further depth (Goering et al, 2002; Caton et al., 2005; Kertesz et al., 2005). Indeed, Culhane and Kuhn's typology has been cited so often in research and policy on homelessness that McAllister, Lennon and Kuang, (2011: 596) claim that it now "seems to be axiomatic" that single adults experience one of these three types of homelessness.

However, as argued in Chapter Two, Culhane and Kuhn's typology does have some conceptual weaknesses. This thesis aims to address these weaknesses by adapting the methodology used in Culhane and Kuhn's work (1998) to the PASS data. The first

weakness identified in the three-part typology is the 30-day break used to identify erratic service use, the analysis employed in this thesis has shortened the break in service use to 5% of each month in the EA use period. This occupancy rate has been applied to all months EA was used to create a new variable. This 'occupancy rate' variable has been used with the variable 'EA Use Period: days' to establish clusters within the research population. These clusters will be discussed in Chapter Six in relation to contributory events in order to examine experiences of homelessness in more depth than was evident in Culhane and Kuhn's work (McAllister et al., 2011). Exits and the total length of time people have used EA will be further discussed in Chapter Seven in relation to the consistency clusters presented in this chapter.

In this chapter, analysis of the research population's data is used to explore how the shortcomings in Culhane, Kuhn's typology of homeless shelter usage patterns can be overcome. The analysis presented here is intended to address two of the core objectives of this thesis which were set out in the introductory chapter. These are to:

− establish if Culhane, Kuhn's typologies of transitional, episodic and chronic homelessness are the 'best fit' for understanding single adults' EA service use in the context of the Dublin region.

− Explore alternative typologies of homelessness which could enable richer understanding of single adults' EA service use in the context of the Dublin region.

The first part of this chapter proposes an alternative framework for analysing EA data building on the strengths of Culhane, Kuhn's work, while overcoming weak points identified. It draws on arguments raised in McAllister, Lennon and Kuang's (2011) critique of Culhane and Kuhn's typology which argues that analyses of this type must be assessed on the basis of both their theoretical and empirical robustness and their utility in terms of their potential for informing policy and service design improvements. This new analytical framework is then applied to data on the research population and, on this basis, a new four-part typology of patterns of EA usage is proposed. Mirroring Culhane and Kuhn's analysis, the next part of the chapter examines the demographic characteristics and patterns of engagement in rough sleeping and ceasing of service use of the EA users in the different clusters in this new typology. The final section examines how this new four-

part typology may be used to inform reform of homeless emergency accommodation provision in Ireland and the potential benefits. In the conclusions it is demonstrated that this four-part typology provides new insights into the experiences of EA users in Dublin which are particularly useful for informing the planning and management of these services and also for identifying which categories of clients are most likely to require support with accessing housing in order to exit homelessness.

An Alternative Typology of Homeless Emergency Accommodation Usage

In an effort to address the shortcomings in Culhane and Kuhn's typology, this thesis employs an alternative approach to analysing data on EA usage in Dublin. This approach focusses on three features of EA usage patterns: duration, stability and transitions. Like that of Culhane and Kuhn, the analysis presented here examines three years of data on homeless EA usage by single people but, in contrast, focusses on transitions into and out of EA. This focus was inspired by the aforementioned concerns about Culhane and Kuhn's failure to fully incorporate exits from homelessness into their model; but also by the debate on the benefit of examining 'pathways' through housing or homeless careers as opposed to focusing on key changes or 'transitions' as explored in Chapter Two. Beer, Faulkner, Paris, & Clower's (2011) work on housing careers makes a convincing case for focussing on the latter on the grounds that it is often impossible to assemble sufficient data to paint a clear picture of housing pathways and also because periods of change (e.g. the transition from living in the marital home to living alone after divorce) are much more significant in housing careers than periods in which one's housing situation remains static.

The related issue of the duration of homelessness between transitions in and out of EA is also a core part of the analysis proposed here. This is based on one of the primary objectives of regional and national homeless policy being reducing the duration of homelessness and increasing the speed and rate of departure from EA (DRHE, 2019a). Evidence on the duration of homelessness is also useful for homeless service design and management. More importantly, there is convincing research evidence which indicates that longer duration of homelessness is associated with falling rates of exit from homelessness and *vice versa* (albeit generated from the small number of longitudinal

studies of homelessness which have been conducted, e.g. Caton, Dominguez, & Schanzer, 2005; Piliavin, Sosin, Westerfelt, & Matsueda, 1993).

In an effort the address the aforementioned problems associated with Culhane and Kuhn's focus on homeless episodes and their measurement of these with reference to a 30-day break in shelter usage, this analysis focusses instead on the stability of EA usage. Stability will be measured with reference to the proportion of each month in homelessness that a homeless person used EA. The decision to focus on accommodation stability also reflects the substantial research evidence indicating that this has a key influence on homeless transitions. It is obviously key to preventing homelessness, through remaining in stable, secure housing (Culhane et al., 2011) and for successful exits through providing stable secure housing to people who have experienced homelessness (Pleace, 2012). In addition, stability in homeless accommodation can improve relationships between service providers and users, which the research evidence indicates is helpful in supporting exit from homelessness (FENATSA Youth Network, 2017).

Data Treatment and Analysis

The analytical approach used in this chapter mirrors that employed by Culhane and Kuhn and others in applications of their model. Thus, cluster analysis was used to interrogate the dataset based on a continuous variable (EA use period in days) and a categorical variable (EA use stability). The latter variable was specified with reference to the overall pattern of usage during the entire period spent in EA (i.e., between entering and ceasing use of EA) rather than on a day-by-day basis. Stable use was defined as 95%+ EA bed use monthly. This specific measure was selected to allow some leeway in the case of data entry errors or short stays away from EA for reasons such as medical treatment or family visits.

These variables were clustered using two-step cluster analysis in SPSS. Two-step clustering was chosen primarily because it bases the number of clusters on how well individuals group together rather than based on the researcher's decision regarding the appropriate number of clusters. The test was set to return a maximum of 15 clusters. The

results returned four good quality clusters (quality = 0.75) with a reasonable ratio between clusters (r = 2.11).

Following this, Chi-Squared tests were conducted to examine the statistical significance of relationships between these clusters and demographic variables. Although these tests established that these demographic factors held some significance (the null hypothesis that demographic factors have no effect on cluster membership cannot be rejected), further analysis using Cramer's V test showed that demographic variables did not have a strong statistically significant relationship with stability clusters (see: Rea & Parker, 2014).

Four Part Typology of Single Adults Emergency Accommodation Use

The data analysis revealed that periods of EA use by homeless adults in the study population ranged from 1 night to 1,185 nights with the mean length of time being 314 nights and standard deviation being 311.78. The large standard deviation has likely been caused by the wide range in length of EA stays. This demonstrates a significant increase in average length of service use periods than had been previously recorded: from 2012-2016 the mean EA use period was 158.62 nights (Waldron et al., 2019). Among the total study population 54% used EA for longer than six months. Of the homeless adults whose EA use periods lasted up to six months, over half had an EA use period of 30 days or less.

As mentioned in Chapter Three, when the data on this duration variable was compared with the stability variable data, four clusters were identified: the numbers in each cluster are detailed in Table 4.1. The largest cluster is the 'long stay inconsistent' group (36.7%) while the smallest cluster is the 'long stay stable' group (17.4%). Both groups encompass adults who used EA for a minimum of 182 days, but the former did so for < 95% of the days in all their months in homelessness, while the latter did so for ≥ 95% of the days in all their months using EA. The two other clusters encompass the 22.7% of single adults who had a medium-term stay in EA (=31-181 days) and the 21.3% whose stay was short (i.e., < 30 days).

Table 4.1 Homelessness Duration and Consistency Cluster Groups[1]

	Short Stay	Medium Stay	Long Stay Inconsistent	Long Stay Stable
Cluster size N	849	832	1348	640
Total number of clients %	23.1%	22.7%	36.7%	17.4%
Min EA use period (days) N	1	31	182	182
Max EA use period (days) N	30	181	1,185	1,179
Mean N	7.78	102.42	562.24	474.24
Standard Deviation	8.133	43.63	266.051	260.05

Note: 1. Source: PASS data compiled by author.

To refine these categories further, stability of EA use is examined in more detail in Table 4.2. This analysis reveals that the short stay group had EA use periods of 30 days or less; this was too short to establish patterns of stable or inconsistent EA usage. Alternative cluster tests (K-Means) on this group did not reveal any significant sub-groups within this cluster. However, the additional analysis summarised in Table 4.2 does shed more light on the consistency of EA usage among homeless adults in the medium stay cluster. It reveals that 57% of these individuals had very stable patterns of EA use (i.e., ≥95% during all months in homelessness and ≥95% during the majority of months) while just 27% had a very inconsistent usage pattern (< 95% all months). As would be expected most people in the long stay inconsistent group used homeless EA for less than 95% of nights during the majority of the months they spent in homelessness, while the opposite pattern prevailed among people in the long stay stable cluster. However, the very high levels of stability of EA usage among homeless people in the latter category is striking. Table 4.2 reveals that 65.7% of homeless people in the long stay stable cluster had used EA for ≥95% all of their months in EA.

Table 4.2 Stability of EA Usage in More Detail[1]

	Short Stay	Medium Stay	Long Stay Inconsistent	Long Stay Stable	Total
	N	N	N	N	N
≤ 30 Days	849	0	0	0	849
Consistent Use[2]	0	242	0	419	661
Mostly Consistent Use[3]	0	234	389	205	828
50/50 Consistency[4]	0	63	90	0	153
Mostly Inconsistent[5]	0	67	502	8	577
Inconsistent[6]	0	227	368	6	601
Total	849	833	1349	638	3669
Cluster Percentage	23%	23%	37%	17%	100%

Note:1. Source: PASS data compiled by author. 2. ≥95% EA usage during all months in EEA; 3. ≥95% EA usage during majority of months in EA; 4. ≥95% EA usage during half of months in EA; 5. < 95% EA usage during the majority of months in EA; 6. < 95% EA usage during all months in EA.

Despite the differences between the research design employed here and that used by Culhane and Kuhn, there are some similarities between the findings of both analyses. Most notably, both identify a group of homeless people who use EA for a short period, cease use and do not return. Table 4.1 reveals that 23.1% of homeless people in Dublin between 2016 and 2018 were in this 'short stay' category. There are obvious similarities between this category and the 'transitional' group in Culhane and Kuhn's typology – although their transitional group is much larger in most estimates. For instance, Waldron, O'Donoghue-Hynes and Redmond's (2019) application of Culhane and Kuhn's typology to data on EA usage in Dublin between 2012 and 2016 (also generated from the PASS database) reveals that a much larger proportion (72%) were in this transitional category. Further analysis by them reveals that 'Some 72% of transitional users demonstrate stays of <100 days and 75% have their immediate housing problem resolved after one homelessness episode' which points to the existence of a smaller sub-group of people who experience very short stays in EA (Waldron et al., 2019: 147).

However, in most other respects the four-part typology of patterns of EA usage proposed here differs significantly from Culhane and Kuhn's framework. This four-part typology identifies two short-term and two long-term groups with length of time in homeless

services being the dominant factor differentiating the two. The homeless people in long-term groups (those who would have been primarily found in the episodic and chronic groups in Culhane and Kuhn's typology) have clustered very clearly, based on stability of shelter use. It is likely that those in the long stay inconsistent group include those who would be considered episodic shelter users in Culhane and Kuhn's model; but the long stay inconsistent group also includes additional individuals who have taken frequent shorter breaks from service.

Thus, the four-part typology proposed in this chapter suggests that during the period immediately following transition into homelessness, length of time in EA is the more important factor which differentiating different groups of EA users; whereas over the long-term, stability of EA use becomes more important. It is also notable that the numbers of EA users categorised as long-term homeless in the analysis presented here are substantially greater than those of the equivalent categories (episodic and chronic) identified in Waldron et al.'s (2019) application of Culhane and Kuhn's typology to Dublin. This may reflect an increase in Dublin's long-term homeless population in recent years, but it more likely reflects the failure of Culhane and Kuhn's three-part model to provide a full picture of all the complexities of homeless experience.

Demographic Characteristics and Homeless Experiences of EA Usage Clusters.

Following the same approach used by Culhane and Kuhn who examine the demographic characteristics of shelter users in the different categories in their typology, Table 4.3 presents the demographic characteristics of the research population in the four different clusters identified in the previous section. As mentioned above, testing of these results did not identify a strong relationship between these demographic characteristics and the EA usage clusters – notably neither did Waldron et al's (2019) application of Culhane and Kuhn's typology to the demographic characteristics of single adult EA users in Dublin. Nonetheless, Table 4.3 does highlight some marked variations between the demographic characteristics of the research population in the different clusters identified in this analysis.

The mean age of the research population was 38 years old, 80% were male and 64% were Irish. As Ireland is a country with high levels of immigration by European Union standards, the citizenship of single adults entering homelessness is an important consideration. The 2016 Census showed that 11.6% of the total population in Ireland were not Irish nationals (CSO, various years). As can be seen in Table 4 non-Irish nationals make up 36% of the research population.

Marked variations between clusters are also evident in Table 4.4 which examines EA users' engagement in rough sleeping and whether they continued to use EA after the end of the study period. This aspect of the analysis contains an element of circularity because high levels of engagement in rough sleeping, and the number of breaks in EA use may determine the cluster in which they are included. Consequently, these relationships have not been formally statistically tested here. However, the rate of departure from EA is a central concern for the analysis of homeless transitions presented in this thesis. Furthermore, rough sleeping is the most extreme and risky manifestation of homelessness and is associated with social and mental health problems which impede exit from homelessness. Therefore it is of crucial interest to policy makers and homeless service providers and directly relevant to this analysis (Bretherton & Pleace, 2018; Larsen et al., 2004). Notably, comparing these two tables reveals some significant overlaps between the inter-cluster variations in rough sleeping, departures from EA and the demographic characteristics of the research population.

Table 4.3 Demographic Characteristics by EA Usage Clusters[1]

	Short Stay		Medium Stay		Long Stay Inconsistent		Long Stay Stable		Total		Notes
	N	%	N	%	N	%	n	%	N	%	
Gender											
Female	187	22%	173	21%	226	17%	160	25%	746	20%	X^2 = 33.647 p = 0.000 Cramer's V = 0.076
Male	662	78%	660	79%	1123	83%	478	75%	2923	80%	
Age[2]											
18-25	181	21%	179	21%	281	21%	91	14%	732	20%	X^2 = 154.734
26-35	238	28%	218	26%	393	29%	136	21%	985	27%	p = 0.000
36-45	204	24%	201	24%	368	27%	158	25%	931	25%	Cramer's
46-55	134	16%	133	16%	211	16%	145	23%	623	17%	V = 0.092
56-65	61	7%	75	9%	76	6%	71	11%	283	8%	
65+	31	4%	27	3%	20	1%	37	6%	115	3%	
Nationality											
Irish	488	57%	548	66%	866	64%	447	70%	2349	64%	X^2 = 93.876
EU	184	22%	143	17%	274	20%	81	13%	682	19%	p = 0.000
Non-EU	127	15%	113	14%	145	11%	97	15%	482	13%	Cramer's
Unknown	50	6%	29	3%	64	5%	13	2%	156	4%	V = 0.092

Note: 1. Source: PASS data compiled by author. 2. age at which EA use first commenced during study period (2016-18).

Comparing these data with the data in Table 4.4 on engagement in rough sleeping and rate of ceasing use and the four homelessness EA usage patterns reveals some interesting overlaps. For instance, the characteristics of EA residents in the 'long stay inconsistent' cluster are distinctive. Men are strongly overrepresented in this cluster: 38% of men have this EA usage pattern and men account for 1,123 of a total of 1,349 people who do so. Furthermore, this cluster is dominated by people who were aged between 18 and 45 years when they first commenced using EA. Some 39% of the people in this age group are long stay inconsistent EA residents and collectively they account for 77% of all those in this cluster. As would be expected, membership of this cluster is also associated with very high rates of rough sleeping (39% of people in that category had slept rough during the study period, compared to 23% of the entire study population) and high level of service occupancy by the end of March 2019 (47% of people in this category were using EA by this time compared to 31% of the entire study population) (see Table 4.4).

Table 4.4 Rough Sleeping Experience and Occurrence of Service Use End Date by EA Usage Clusters[1]

	Short Stay		Medium Stay		Long Stay Inconsistent		Long Stay Stable		Total	
	N	%	N	%	N	%	N	%	N	%
Has Slept Rough[2]	104	12	155	19	520	39	57	9	836	23
Used EA week ending 31.03.2019	0	0	135	16	633	47	364	57	1,132	31
Total in Cluster	849		833		1,349		638		3,669	

Note: 1. Source: PASS data compiled by author. 2. Data on rough sleeping was compiled from outreach staff logs of their engagements with rough sleepers on the PASS system and from the bi-annual rough sleeper count carried out in the Dublin region.

Table 4.3 also reveals that the characteristics of the 'long stay stable' cluster are distinctive. EA residents aged 46+ are overrepresented in this cluster compared to their representation in the total cohort of EA residents. Irish nationals are also overrepresented in this cluster (they account for 70% of long stay stable EA users but only 64% of all EA users) as are women (they make up 25% of people in this cluster but only 20% of all EA users), although numerically most long stay stable EA residents are men (they account for 478 out of total of 638 EA residents in this category). As

would be expected, rates of rough sleeping among EA residents in this cluster are below average (9%) but so are their rates of ceasing EA usage (43% had ceased service usage by 31/03/2019) (see Table 4.4).

In contrast, the demographic characteristics of the members of the 'short stay' cluster deviate only marginally from those of the EA-using population as a whole. Young people aged between 18 and 25 and between 26 and 35 years are marginally over-represented in this group, as are people aged 65+, women, and citizens of the UK and other EU countries (i.e., of the rest of the EU, excluding Ireland). This cluster is of particular interest because it includes people for whom homelessness was a short-term phenomenon given that they ceased EA usage quickly (none of the people in this cluster used EA during the two months prior to the week ending 31/03/2019) and who rarely sleep rough (just 12% of the people in this cluster did so). Therefore, in some respects this cluster encompasses those for whom the EA system worked successfully as it provided them with a temporary place to stay after they had lost their homes and helped to ensure they did not need to sleep rough.

Discussion

Previous applications of Culhane and Kuhn's typology found that 78% of single adults were in the transitional homelessness cluster (Waldron et al., 2019). However, within this cluster there is a very broad range of number of nights EA was used (1 - 373). Part of applying Culhane and Kuhn's approach is to 'collapse' days spend in EA/shelters together, meaning that so long as no 30-day breaks were taken, stays in EA/shelters would be counted as one episode. The 'collapsing' of days into episodes masks the length of time people are spending in EA and groups people with very different types of EA service use together. The length of time spent using EA is important for policy making and service provision as the current EA system is designed for short-term (<6 months) use. According to Waldron and colleagues (2019) research, a minority of people (12%) used EA chronically between 2012-2016. However, when the maximum length of time EA was used for each cluster was considered, their research also shows that people in each cluster used EA for more than the 6 months the system is designed for. What is not clear from Waldron and colleagues research is how many people used EA as long-term accommodation.

As shown above, the majority of the single adults in the research population did so for more than 6 months (54%). Comparatively, 1,325 (36%) used EA for a short period of time with few breaks, as is the target use pattern in the current policy. The increased dependency on EA is likely in part due to the lack of affordable accommodation or available social housing, particularly for this group (single adults). Based on the needs of the research population for long-term accommodation, the current EA model is not fit for purpose.

One potential change to the EA system under consideration is switching to single occupancy rooms which can be booked on a multi-night or 'rolling' basis. The advantage of switching to single occupancy units as opposed to hostel style accommodation for this population is multi-fold. As EA using single adults have become more likely to be in homelessness long term, engagement with services becomes increasingly important. Engagement would be easier if those using EA were in a safe, stable environment. In addition to service engagement, reducing stress and instability has the added advantage of reducing stress-related illnesses, common among those who experience homelessness (Fabian, 2019; Goodman et al., 1991; Greenwood et al., 2005). Increased accommodation stability should also reduce occurrences of rough sleeping and the associated challenges (Mackie et al., 2017). When the associated costs of providing public services are taken into account (policing, street cleaning, health care, multi-site services) (O'Sullivan & Musafiri, 2018), the cost of providing single unit accommodation with communal spaces and onsite services is likely to be significantly less than the current system; and the associated benefits to both the individual and wider society increase the value of a more secure and stable system. The advantage of this model for service providers is that it should reduce the distortion of levels of support need previously identified in the Irish context (O'Sullivan, 2012) by reducing stress and erratic service use. This will allow service providers to more accurately assess the support needs of service users and identify those who can leave homeless accommodation without support so long as there is appropriate accommodation available.

Conclusion

This chapter employed the dataset on EA usage patterns in Dublin to reflect on, test and critique the use of EA data in research on homelessness heretofore. This analysis

focused in particular on Culhane and Kuhn's analysis of data on single adult users of homeless shelters in New York and Philadelphia and on the very influential typology of three typical patterns of homeless shelter usage - transitional, episodic and chronic - which they produced on the basis of this analysis (Culhane and Kuhn, 1998; Kuhn and Culhane, 1998). Their work was ground-breaking because it shifted the focus of research on shelter data from the characteristics of residents to their shelter usage patterns. In this chapter, building on the strengths of their work, while overcoming the weaknesses has been attempted.

McAllister, Lennon and Kuang's (2011) critique of Culhane and Kuhn's typology argues that analyses of this type must be assessed on the basis of both their theoretical and empirical robustness and their utility in terms of their potential for informing policy and service design improvements. Culhane and Kuhn's typology has key weaknesses in the former category, particularly related to their focus on homelessness episodes and their decision to measure these with reference to 30-day breaks in shelter usage. This decision is grounded in neither empirical research nor in an explicit theory but, more importantly, it disguises important patterns in shelter usage and may lead to the mis-categorisation of some shelter residents.

As an alternative, the analysis presented here has focused on transitions into and out of EA and the stability of EA usage in between these transitions. This design is grounded in the theory of housing transitions and also the significant empirical research which indicates that stability of EA usage is a critical consideration in terms of successful exit from homelessness (Culhane, Metraux, & Byrne, 2011; Pleace, 2012; FENATSA Youth Network, 2017). Applying this design to this dataset on EA usage in Dublin between 2016 and 2018 reveals four clear EA usage clusters – short stay, medium stay, long stay inconsistent and long stay stable. Although there is not a statistically strong relationship between these clusters and the demographic characteristics of EA users, comparing the descriptive data does reveal clear overlaps between the two and variations in rough sleeping among EA users and length of service use.

By providing a clearer and more accurate profile of EA usage patterns the analysis presented here has the potential to fulfil the requirements of McAllister, Lennon and Kuang's (2011) last assessment criterion, which is utility in terms of potential for

informing policy and service design improvements; although generating specific proposals to improve services in Dublin will require further research. This research identifies that just under a quarter of EA users (those in the short stay cluster) spend less than 30 days in EA and do not return to EA after this single episode. Further research on the characteristics of this cohort and the differences between them and EA users in the medium stay group would enable homeless service providers to target additional supports more effectively for those who need them; and also inform the design of preventative services which are likely to be particularly effective for these short stay EA users (Maher & Allen, 2014). Research on short-term homelessness (≤6 months) would also fill a key gap in knowledge, given that research on shelter users conducted since Culhane and Kuhn's ground-breaking work has focussed strongly on the 'chronic group' they identify (McAllister et al, 2011).

The analysis presented here suggests that consistency of EA usage is the key factor which differentiates between the two clusters of long stay EA residents. The analysis has revealed that a quarter of EA residents are effectively 'stuck' in EA which they are forced to use as their long term, stable home. Despite considerable investment by government and a rapid expansion of homeless services (O'Sullivan, 2020), the current system is failing to move these people out of EA and into permanent homes. It is possible that those with stable EA usage patterns could leave homelessness if provided with housing, needing little to no support. Alternatively, this stability may suggest that they are effectively institutionalised in EA and thereby may struggle with independent living. These questions require further research. In contrast, the high levels of rough sleeping among long stay inconsistent EA users suggests that they are likely to require significant support to enable them to exit homelessness successfully, but again further research could examine the veracity of this view.

Chapter Five   Transitions into Homelessness

Introduction

As discussed in Chapter Two, the triggers of homeless have historically been simplified into three categories. These are: sin talk (an individual's social deviance or criminality), sick talk (an individual's poor mental health or addiction issues) and system talk (the systemic barriers to housing or economic stability) (Gowan, 2010). Over time, our understanding of homelessness has developed and is now accepted as a complex and multifaceted series of events in a person's life involving "deprivation across a number of dimensions" (Somerville, 2013: 384). Within homeless research one method of understanding this experience has been to focus on the interaction between structural factors (Fitzpatrick, 2005) and individual choices (Fitzpatrick et al., 2013). In recent years, this approach has come to dominate the research on homelessness to the extent that it has been dubbed 'the new orthodoxy' (Fitzpatrick, 2005;Somerville, 2008). However, Fitzpatrick (2005) raises concerns that this approach often 'lacks any clear conceptualization of causation', structure and agency; and often also fails to clarify why the individual factors which trigger homelessness occur.

Chapter Two argued that the housing transitions framework has the potential to overcome these shortcomings in the literature on homelessness; and Chapter Three detailed how this framework is adapted to better meet the challenges of researching homelessness through the analysis presented in this thesis. One of the aims of this thesis is to examine patterns of entries into homelessness. To do this, the current chapter applies the analytical framework in order to explore transitions into homelessness among the research population. The analysis presented here focuses on the previous accommodation occupied by the research population prior to becoming homeless and explores whether this changes over the life course. In addition to the challenges of finding housing or maintaining tenancies, homeless people may experience contributory events which either triggered or contributed to their transition into EA. To explore this aspect of transitions into homelessness, people's self-reported reasons for homelessness are examined here and the extent to which these have changed over the life course. The inclusion of these contributory events in the analysis seeks to incorporate McNaughton's (2008) ideas on homeless

transitions, as discussed in Chapter Three. The analysis in this chapter includes self-reported information from the homeless population studied, thereby including their voice in the analysis.

This chapter is organised into five further sections. The next section briefly discusses the specific data treatment for the analysis of transitions into homelessness. The data on transitions into homelessness are then presented. As mentioned above, these data include answers given by the research population regarding their reasons for entering EA and their previous accommodation before entering EA. In addition to these variables, information gathered from PASS database has been collated to examine contributory events prior to entering EA. In the second section of this chapter, the results of the application of the analytical framework described in the methodology chapter will then be presented. The results of this framework will be broken into two parts, transitions into homelessness (reason and previous accommodation) and contributory events prior to EA. Each of these tables includes information on the age of the individuals included in this analysis. The third section will discuss the results from the analysis stage based on the age groups, young adults, middle-aged adults and older adults. In the fourth section, the significance of these results is discussed in the context of the relevant literature and in terms of their implications for the design of policies and services to prevent homelessness and for research on homelessness. Finally, the conclusions of this chapter highlight the key differences between the age cohorts' transitions into homelessness and their relevance to research, policy making and homeless prevention services.

Data Treatment and Results

Four variable groups from the dataset on homeless emergency accommodation users in Dublin which was collated for this research was used in the analysis of transitions into homelessness presented in this chapter. These are, Age Cohort, Previous Accommodation, Reason for Homelessness and pre-EA Contributory Events.

Pre-EA contributory events variables were created specifically for analysing transitions into homelessness. The data for the Pre-EA Contributory Events variable has been collated based on information from other variables and case notes which confirm that contributory events recorded occurred prior to the individual's first night in

EA. The resulting variables are 'pre-EA Contributory Events': 'pre-EA Homeless Event', pre-EA Life Event, pre-EA Health Event' and 'pre-EA Institutional Event'.

Using crosstabulations, the age cohorts were compared to previous accommodation, reasons for homelessness and experiences of contributory events prior to entering EA. The age groups used are younger adults (18-34; n=1,618), middle-aged adults (35-54; n=1,612) and older adults (55+; n=439). Chi-Squared and Cramer's V tests were run as part of the crosstabulations between age cohort and previous accommodation; age cohort and reason for homelessness; and age cohort and contributory events experienced.

In addition to how previous accommodation prior entering and reasons for entering EA change over the life course, additional demographic variables have been examined in relation to previous accommodation and age cohort. These variables include gender and citizenship, the results of this analysis are interesting and shed light on the experiences of single adults transitioning into EA, however significance testing did not return results which indicated significant relationships between demographic variables (apart from age) and previous accommodation.

Transitions into Homelessness

Accommodation Prior to Entering Homelessness

Table 5.1 sets out the results of the descriptive analysis of the data on the type of accommodation which single homeless people reported living in immediately prior to their entry into emergency accommodation. This variable is derived from a dropdown answer list on PASS which allows service providers to choose from pre-set answers or to add a new answer. Notably the previous accommodation types identified by homeless people did not generally deviate from the options pre-set on PASS, but many respondents did provide additional detail in their answers to this question. Some respondents gave basic information (e.g. living with family members) others gave more detailed information (e.g. living with parents; private renting tenancy subsidised by housing allowance).

Table 5.1 Previous Accommodation Prior to Becoming Homeless and Reasons for Homelessness Among Emergency Accommodation Users in the Dublin Region, 2016-2018[1]

	Younger Adults	Middle-Aged Adults	Older Adults	Total
Previous Accommodation[2]				
Homeless	7%	7%	7%	7%
Homeowner	0%	1%	3%	1%
Living with Friends	10%	9%	7%	9%
Living with Parents	17%	6%	1%	10%
Other Accommodation	16%	17%	19%	17%
Parents/Family	15%	9%	12%	12%
Private rented (own means)	15%	25%	31%	21%
Private rented (supported by housing allowances)	1%	3%	3%	2%
Social housing	4%	6%	4%	5%
Unknown	16%[3]	16%	13%	16%
Notes[4]				X^2 = 2285.682; p = <0.001; Cramer's V = 0.238

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions; 3. Whole number percentages reported which add up to 101%; 4. Chi-Squared and Cramer's V tests conducted only on reported accommodation/reason, categories 'other' and 'unknown' not included.

A total of 18 previous accommodation types were identified in the PASS database and 69% of the research population provided this information on PASS. The remaining 31% either did not answer or were recorded as having a previous accommodation type of 'other'. The nine accommodation types inhabited by 1% or more of this group prior to transitioning into homelessness are outlined in Table 5.1. The most common accommodation people from the research population left prior to entering EA was private rental paid for through the individuals own means (21%). This was followed by 'Other Accommodation' (17%): this category refers to specified accommodation types occupied by less than 1% of the research population (including: prison, state care and traveller specific accommodation). Unknown previous accommodation (16%) includes people who did not answer or provided the answer 'other' with no additional information. Those counted as entering EA from another form of homelessness (7%) includes those who answered domestic violence shelters, squats, rough sleeping, sofa-surfing or EA in another region. The relationship between age cohort and previous accommodation was moderately significant (Creamer's V = 0.238). Housing tenure patterns in Ireland have changed significantly over the past few decades. Home ownership has reduced from its peak in the early 1980's when 80% of households owned their homes, to 68.9% of households according to the 2016 Census (CSO,

various years). Concurrently, the proportion of households living in private rented accommodation increased from 12% to 19% between 2006-2016 while the social housing sector stagnated (it increased from 7% to 8.7% between 2006 and 2016) (CSO, various years). Notably these trends were much more pronounced in the Dublin region where between 2006 and 2016, home ownership decreased from 69% to 60% of households, and private renting increased from 14% to 24% of households. Meanwhile, the proportion of households living in social housing in Dublin declined from 12% to 9% (CSO, various years).

Reasons For Homelessness

Table 5.2 details single homeless EA users' self-reported reasons for homelessness. In total, the research population provided 46 different answers to this question, but some were very similarly worded (e.g. family circumstances: unknown and family circumstances: other) and these types of answers were combined together into a single category (e.g. family circumstances) during the data collation phase of the research. In total, 69% of the single homeless population recorded their reasons for homelessness on the PASS database. The remaining 31% did not answer or recorded their reason for homelessness as 'other'.

Once this process of combining some answers and cleaning the data was completed, 20 answers remained. For data protection and confidentiality reasons answers provided by 1% or less of respondents were not reported. Therefore Table 5.2 details the 14 reasons for homelessness provided by 1% or more of the research population. The Chi-Squared tests showed significance between each life stage and reason for homelessness. The Cramer's V tests showed moderate effects. Therefore, the null hypothesis that life stage has no effect on previous accommodation type or reason for homelessness cannot be rejected.

The most common reason for homelessness provided was 'family circumstances' (16%). Relationship breakdown (other, parent, partner) account for a further 8% of reasons for homelessness among the research population. The category 'other reason' (12%) includes answers provided by less than 1% of the research population (e.g. overcrowding, fire, leaving care/prison/treatment facility/hospital/direct provision). The category 'abuse' (1%) also combines two provided reasons: domestic violence and sexual or physical abuse. Unknown reasons (22%) includes where there was no answer or 'other' with no additional details.

Table 5.2: Age and Reasons for Homelessness[1]

	Younger Adults	Middle-Aged Adults	Older Adults	Total
Self-Reported Reason for Homelessness[2]				
Abuse	1%	1%	1%	1%
Asked to Leave Acc	11%	13%	18%	13%
Evicted	3%	4%	5%	4%
Family Circumstances	22%	12%	11%	16%
Involuntary Sharing	2%	2%	3%	2%
Leaving Care	2%	0%	0%	1%
Leaving Hospital	1%	1%	1%	1%
Leaving Prison	4%	3%	3%	3%
Mental Illness	2%	2%	2%	2%
No Income Source	5%	8%	4%	6%
Notice of Termination[3]	1%	2%	3%	2%
Notice to Quit[4]	2%	6%	6%	4%
RB[5]: Other	2%	2%	1%	2%
RB: Parent	4%	1%	0%	2%
RB: Partner	3%	5%	4%	4%
Substance Abuse: Alcohol	2%	3%	1%	2%
Substance Abuse: Drugs	2%	2%	0%	2%
Notes[6]				X^2 = 232.493; p = <0.001; Cramer's V = 0.216

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions; 3 & 4. 'Notice to quit' and 'notice of termination' are distinct legal terms – the former is a legal notice of the repossession of a dwelling by a landlord or bank, the latter is a legal notice instructing a tenant to vacate a dwelling. However, the data outlined in this table are self-reported and homeless people may be using these terms interchangeably; 5. RB: relationship breakdown; 6. Chi-Squared and Cramer's V tests conducted only on reported accommodation/reason, categories 'other' and 'unknown' not included.

Breakdown of relationships, particularly family relationships has been previously identified as being a key driver of homelessness (Chamberlain & Johnson, 2013; Ravenhill, 2008) as well as being a driving reason for exiting homelessness (Parsell, 2018). The data set out in Table 5.2 echoes the findings of previous research because they show that difficulties within personal relationships are the leading reason for homelessness and people are most likely to have left accommodation they shared with family or friends. Additional reasons for homelessness have been identified in previous research, specifically relating to housing affordability, unemployment and domestic violence (Fabian, 2019). These issues are reflected in Table 5.2 under the

categories 'Abuse', 'No Income Source' where each was experienced by a minimum of 1% of the research population. As discussed in more depth below, reasons for homelessness and accommodation change over the life course, however breakdown of personal relationships and loss of private rental tenancies are dominant themes throughout.

Contributory Events Prior to Entering Emergency Accommodation

As discussed in Chapter Two, experiences prior to homelessness have been previously linked to transitions into homeless (Fitzpatrick et al., 2013). For this chapter, as mentioned above, new variables were created in order to capture the contributory events experienced prior to entering EA. By separating out these pre-EA events, the relationship between the age at which a person became homeless and the factors which may have played a part, can be examined. The results of this analysis are set out in Table 5.3.

Analysis of the contributory events which single EA users experienced prior to their transition into homelessness, reveals that a total of 1,904 (or 52% of the relevant population) had experienced one or more contributory events prior to entering EA. As shown in Table 5.3, the majority of those who have experienced contributory events prior to homelessness have experienced one event (43%), while a minority have experienced two events (8%) or more (1%). It is important to acknowledge that other single EA users may have experienced contributory events but may not have recorded this information on PASS.

Table 5.3 examines variations in contributory events among homeless people at different stages in the life course. Although Chi-Squared tests showed significance for health and institutional events over the life course, the Cramer's V tests for the one-way cross tabs showed only a small effect. Given the type of data used here and the high percentage of people who experienced contributory events prior to entering homelessness; the results presented here indicate that further research would be required to fully explore the potential links and their significance in homeless transitions in the Dublin region.

Table 5.3 Contributory Events and Age Group During Transition into Homelessness[1]

	Younger Adults	Middle-Aged Adults	Older Adults	Total	Notes[2]
One-way crosstabulation					
Homeless	7%	6%	6%	6%	X2 = 0.876; p = 0.645; Cramer's V = 0.015
Health	4%	5%	2%	4%	X2 = 12.229; p = 0.002; Cramer's V = 0.058
Life	30%	30%	28%	30%	X2 = 3.984; p = 0.136; Cramer's V = 0.033
Institutional	4%	3%	2%	3%	X2 = 9.725; p = 0.008; Cramer's V = 0.051
Two-way crosstabulation					
Homeless & Health	1%	2%	1%	1%	
Homeless & Life	4%	5%	3%	4%	
Homeless & Institutional	1%	1%	1%	1%	
Health & Life	1%	1%	0%	1%	
Health & Institutional	0%	0%	0%	0%	
Life & Institutional	1%	0%	0%	0%	
Three-way crosstabulation					
Homeless, Health & Life	1%	1%	1%	1%	
Homeless, Health & Institutional	0%	0%	0%	0%	
Homeless, Life & Institutional	0%	0%	0%	0%	
Health, Life & Institutional	0%	0%	0%	0%	
Four-way crosstabulation					
All	0%	0%	0%	0%	
None	47%	47%	55%	48%	

Note: 1. Source: PASS data compiled by author. 2. Chi-Squared and Cramer's V tests have been conducted only on one-way crosstabulations.

Transitions into Homelessness Across the Life Course

Younger Adults

According to the last census (2016), 18–34 year olds made up 22% of the population of Ireland (CSO, various years). In comparison, younger adults account for 44% of the research population. This analysis points to several factors which explain why the risk

of transitioning into homelessness is higher among younger adults than their older peers.

Members of this group were primarily living with family prior to transitioning into homelessness (32%). This is unsurprising when seen in the context of the general youth population during the same period. In 2017, 85% of 18-year-olds in Ireland were living with their parents. This number drops as age increases and, comparatively, only 9% of 34 year olds were living with their parents that year (CSO, various years). In addition, 34% of this group came from accommodation which was, at least in part, paid for by the state (HAP, rent supplement or social housing). This echoes McNaughton's findings that having state support will not always be sufficient to prevent homelessness occurring (McNaughton, 2008).

Table 5.4 Younger Adults, Previous Accommodation and Demographic Variables[1]

Previous Accommodation[2]	Female	Male	Irish	EU	Non-EU	Total
Homeless	6%	8%	7%	14%	6%	8%
Homeowner	0%	0%	0%	0%	0%	0%
Living with Friends	9%	10%	7%	13%	18%	10%
Living with Parents	17%	17%	22%	5%	7%	17%
Other	16%	16%	17%	15%	17%	16%
Parents/Family	17%	14%	17%	5%	18%	15%
Private rented (own means)	16%	14%	12%	19%	26%	15%
Private rented (supported by housing allowances)	1%	1%	1%	1%	0%	1%
Social Housing	4%	4%	5%	1%	2%	4%
Unknown	14%	17%	13%	27%	6%	16%

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions.

Table 5.4 shows the reason for homelessness provided for younger adults disaggregated according to their gender and citizenship.. Women in the younger adult cohort were more likely to have provided their previous accommodation (86%) than men (83%) and were less likely to have been homeless prior to entering EA (6%). While living with parents or other family members was the most common previous accommodation type for this cohort, this changes based on citizenship, Non-EU citizens were most likely to have lived in private rental accommodation paid for through

their own means (26%). EA citizens were the least likely to have been living with family (10%) and the most likely to have entered EA from another form of homelessness (14%). Irish citizens were more likely to have entered EA from social housing (5%) than either EU (1%) or non-EU (2%) citizens. Non-EU citizens were the only demographic among whom 0% entered EA from a private rental tenancy which was supported through subsidies. This accommodation type was unusual (1%) among this cohort overall.

The reasons for homelessness given by the young adults in the research population are varied but do reflect the different relationship and economic challenges faced by this age group. Although having no income source (5%) and being asked to leave their accommodation (11%) were two of the top three reasons for homelessness in this group, these reasons were less frequently reported than among their older counterparts. The primary reason for homelessness provided by this group was family circumstances (22%), which is combined here with breakdown of parental relationship when examining those whose primary reason for leaving home was related to challenges within the family (26%). Younger adults experienced family circumstances/relationship breakdown with a parent twice as often as the those in the next age group – middle-aged adults (13%).

Table 5.5 shows the reason for homelessness provided for younger adults based on their additional demographic information (gender/citizenship). Women were more likely to have become homeless due to abuse (3%) than men (1%) in this cohort. Men were more likely to have become homeless after leaving prison (5%) than women (0%). No income source was the most frequently reported reason for homelessness among EU citizens (17%). Being asked to leave their accommodation was the most common reason provided by non-EU citizens (21%). For Irish citizens, family circumstances were the reason most frequently reported (27%). Non-EU citizens did not report experiencing leaving prison, hospital or care as a reason for homelessness (0%) nor did they report substance abuse (0%).

Table 5.5 Younger Adults, Reason for Homelessness, Demographic Variables[1]

Reason[2]	Female	Male	Irish	EU	Non-EU	Total
Abuse	3%	1%	1%	2%	1%	1%
Asked to Leave Acc	12%	11%	10%	10%	21%	11%
Evicted	4%	2%	3%	5%	2%	3%
Family Circumstances	21%	22%	27%	10%	16%	22%
Involuntary Sharing	2%	3%	2%	1%	5%	2%
Leaving Care	2%	2%	3%	0%	0%	2%
Leaving Hospital	0%	1%	1%	0%	0%	1%
Leaving Prison	0%	5%	5%	2%	0%	4%
Mental Illness	2%	2%	2%	2%	1%	2%
No Income Source	3%	6%	2%	17%	6%	5%
Notice of Termination[3]	2%	1%	0%	4%	2%	1%
Notice to Quit[4]	1%	2%	1%	4%	3%	2%
RB[5]: Other	2%	2%	2%	1%	2%	2%
RB: Parent	5%	3%	5%	1%	1%	4%
RB: Partner	3%	3%	3%	2%	4%	3%
Substance Abuse: Alcohol	2%	2%	3%	1%	0%	2%
Substance Abuse: Drugs	2%	2%	2%	2%	0%	2%
Unknown	32%	32%	27%	37%	34%	32%

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions; 3 & 4. 'Notice to quit' and 'notice of termination' are distinct legal terms – the former is a legal notice of the repossession of a dwelling by a landlord or bank, the latter is a legal notice instructing a tenant to vacate a dwelling. However, the data outlined in this table are self-reported and homeless people may be using these terms interchangeably; 5. RB: relationship breakdown.

Among the three life stage groups examined here, 53% of younger adults reported experiencing a contributory event prior to entering EA as a single adult. The most common event experienced was a life event (30%). This age cohort was the most likely to experience an institutional event (4%) or a homeless event (7%) prior to

entering EA. Although this group was more likely to experience multiple contributory events (8%) than the older adult cohort but not the middle-aged cohort, they were the only group to experience both life and institutional events prior to entering EA (1%).

TUSLA, the Irish agency responsible for children and families, has significantly extended the supports provided to young people leaving state foster or residential care in recent years (TUSLA, 2017). In addition, based on the number of young people leaving a family home or being unable to maintain a private tenancy, expansion of tenancy sustainment supports such as SLÍ may help young people living independently for the first time. Improved access to social housing and the private market through increased HAP rates, by supplying more one and two bed units suitable for small households, are likely to expand the housing options for this group and reduce the need to enter EA. Given the high rate of contributory events experienced by younger adults, improved availability of therapeutic supports and health care may also be beneficial in terms of preventing transitions into homelessness.

Middle-Aged Adults

Middle-age has been defined according to Beer and colleagues' (2011) interpretation of the period during which individuals move into a family home with a partner and have children which they then raise in that home. This age range encompasses the 35 to 54 age group. It represented 30% of the general Irish population according to the 2016 census (CSO, various years) but represented 44% of the EA using population examined here.

The main type of accommodation previously occupied by the middle-aged adult, EA using population was also private rented accommodation (25%), though they are comparatively less likely than their older peers to come from this type of accommodation. Members of this group were less likely to come from subsidised housing (i.e. receiving rent subsidy payments from the state or living in social housing) (25%) than the members of the younger adult age group.

Table 5.6 shows the previous accommodation middle-aged adults entered EA from. Private rental accommodation paid for through the individuals own means was the most common previous accommodation type for this age cohort (25%). Women (29%) were more likely than men (24%) to have entered EA from self-funded private rental

accommodation. Non-EU citizens (33%) were more likely than Irish (23%) or EU citizens (29%) to have previously lived in a private tenancy supported through their own means. Women had the highest percentage of entering EA from social housing (9%) than men (6%) and Irish citizens (8%) were more likely to have previously lived in this accommodation type than EU (2%) or non-EU (6%) citizens. Middle-aged adults who were not originally from Ireland were unlikely to have entered EA from a family home, 4% of EU 6% of non-EU citizens had previously been living with parents or other family members. Irish citizens had the highest occurrence of previously being a homeowner (2%). Non-EU citizens had the highest frequency of having previously lived with friends (17%). Women were less likely to have entered EA from another form of homelessness (7%) than men were (9%). EU citizens were the most likely of the citizenship groups to have entered EA from another form of homelessness (13%).

Table 5.6 Middle-Aged Adults, Previous Accommodation and Demographic Variables[1]

Previous Accommodation[2]	Female	Male	Irish	EU	Non-EU	Total
Homeless	7%	9%	8%	13%	8%	9%
Homeowner	1%	1%	2%	1%	1%	1%
Living with Friends	9%	9%	8%	9%	17%	9%
Living with Parents	5%	6%	9%	0%	1%	6%
Other	14%	17%	17%	17%	16%	17%
Parents/Family	8%	9%	12%	4%	5%	9%
Private rented (own means)	29%	24%	23%	29%	33%	25%
Private rented (supported by housing allowances)	4%	3%	3%	2%	4%	3%
Social Housing	9%	6%	8%	2%	6%	6%
Unknown	14%	17%	12%	24%	9%	16%

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions.

The reasons for homelessness most frequently provided by middle-aged adults were having no income source (8%), family circumstances (12%) and being asked to leave accommodation (13%). Thus, these reasons echo those most commonly cited by their younger counterparts. However, those in the middle-age group cited a larger number of reasons for homelessness, therefore the proportions in each of these categories was smaller. In the general population, 30% of this age group was living in rented accommodation in 2016 (CSO, various years).

Table 5.7 Middle-Aged Adults, Reason for Homelessness, Demographic Variables[1]

Reason[2]	Female	Male	Irish	EU	Non-EU	Total
Abuse	4%	1%	1%	1%	2%	1%
Asked to Leave Acc	16%	13%	15%	8%	16%	13%
Evicted	2%	4%	3%	5%	7%	4%
Family Circumstances	16%	12%	14%	8%	12%	12%
Involuntary Sharing	1%	3%	2%	1%	5%	2%
Leaving Care	0%	0%	0%	0%	0%	0%
Leaving Hospital	1%	1%	1%	2%	0%	1%
Leaving Prison	1%	4%	5%	1%	2%	3%
Mental Illness	2%	2%	2%	2%	1%	2%
No Income Source[3]	6%	8%	4%	21%	5%	8%
Notice of Termination[4]	3%	2%	1%	4%	3%	2%
Notice to Quit	7%	5%	4%	9%	10%	6%
RB[5]: Other	2%	2%	2%	1%	2%	2%
RB: Parent	0%	1%	2%	0%	0%	1%
RB: Partner	1%	6%	5%	4%	7%	5%
Substance Abuse: Alcohol	2%	3%	5%	1%	0%	3%
Substance Abuse: Drugs	2%	2%	4%	0%	0%	2%
Unknown	32%	31%	29%	33%	25%	31%

*Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions; 3 & 4. 'Notice to quit' and 'notice of termination' are distinct legal terms – the former is a legal notice of the repossession of a dwelling by a landlord or bank, the latter is a legal notice instructing a tenant to vacate a dwelling. However, the data outlined in this table are self-reported and homeless people may be using these terms interchangeably; 5. RB: relationship breakdown.*Table 5.7 reveals that across all demographic variables considered (age, gender and citizenship) middle-aged women had reported the highest frequency of entering EA as a result of experiencing abuse (4%). Middle-aged, EU citizens had the highest reported experience of entering EA due to a lack of income (21%), higher than their younger (17%) and older (10%) peers and compared to Irish (4%) and non-EU (5%) citizens.

Middle-aged adults were just as likely as their younger peers to have experienced a contributory event prior to entering homelessness (53%). Members of this age group were most likely to have experienced health (5%), combined homeless and life (5%) events and combined homeless and health (2%) events among the research population. Middle-aged adults were the age group most likely to have experienced homeless and life events (5%) prior to entering homelessness. In total, 9% of this group had experienced multiple contributory events either prior or during their EA usage period, more than either of the other two age cohorts in the research population.

Middle-aged adults had the same rate of experiencing life events (30%) as younger adults. However, the kind of life events they experienced are distinctive among the research population. The younger adult group are more likely to have children who did not follow them into homelessness or to be in a couple. The middle-aged cohort were more likely to have moved country. 4% of both cohorts moved from another country with either a partner or children.

Middle-aged adults were the least likely to be Irish and had the most variation in their reasons for homelessness and previous accommodation types. Most migrants in this group have come from EU countries and may face language barriers or discrimination in housing. Discrimination against migrants in the private rental market has previously been identified, as is the increased likelihood of their being in low-income jobs compared to their Irish peers (Conroy & Brennan, 2003; Grotti et al., 2018; Joseph, 2019). Given that migrants represent 36% of the population, homeless preventions services are needed specifically for those who may be unaware of their rights or what to expect in a new country.

Older Adults

This age group is the only one among the research population less represented in EA than in the general population. Those aged 55 and over made up 12% of single EA users and 23% of the whole Irish population in 2016. In the general population, this age group was also the most likely to own a house. In 2016, an average of 75% of independent adults in this age group owned their own home outright and a further 12% owned a home with a mortgage (CSO, various years).

Within the EA using population, older adults were the most likely to have entered EA from private rented accommodation, either assisted by state funding or paid for

through their own means (34%). Despite being the smallest age group represented, older adults made up 17% of all those who entered from private rental accommodation. They also have the highest percentage of having previously lived in a home they owned (3%). This group was the least likely to have been receiving state support in their previous accommodation (19%).

Table 5.8 Older Adults, Previous Accommodation and Demographic Variables[1]

Previous Accommodation[2]	Female	Male	Irish	EU	Non-EU	Total
Homeless	7%	9%	7%	11%	9%	8%
Homeowner	5%	3%	4%	2%	0%	3%
Living with Friends	5%	8%	7%	4%	13%	7%
Living with Parents	1%	1%	2%	1%	0%	1%
Other	16%	20%	19%	18%	19%	19%
Parents/Family	12%	12%	14%	4%	19%	12%
Private rented (own means)	38%	28%	30%	37%	32%	31%
Private rented (supported by housing allowances)	5%	3%	3%	6%	2%	3%
Social Housing	3%	4%	5%	1%	0%	4%
Unknown	11%	14%	10%	18%	9%	13%

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions.

Table 5.8 shows the types of previous accommodation older adults entered EA from broken down by gender and citizenship demographic variables. Women were most likely to have previously lived in private rental accommodation or their own home (50%) than men in the same age cohort (38%), middle-aged women (43%) or younger women (21%). EU citizens also had a high occurrence of living in self-funded private rented accommodation (37%) compared to the cohort overall (31%). Living with parents specifically was uncommon among this age cohort (1%) particularly among those who held non-EU citizenship (0%). However, non-EU citizens had the highest percentage of previously living within a family home (19%). EU citizens were least likely to have entered EA from a family home (5% parents; parents/family). Men were slightly more likely to have previously lived in social housing (4%) than women (3%). Whereas the reverse was true for self-funded private rental accommodation where women had a slightly higher percentage reporting that as their previous accommodation (5%) than men (3%). Overall, within this cohort, homeownership prior

to entering EA was unusual (3%), women had the highest previous homeownership (5%) and non-EU citizens the lowest (0%). EU citizens were the most likely to have reported living in another form of homelessness prior to entering EA (11%) among older adults.

Older adults were also the least likely to report family circumstances (11%) as their reason for homelessness but the most likely to enter EA after being asked to leave their accommodation (18%). It was the only one of the three cohorts not to report 'No Income Source' in the top three reasons for entering EA.

Table 5.9 shows that 27% of older women entered EA after being asked to leave their accommodation. Across the demographic variables considered here this is the highest frequency of this reason for homelessness being reported. Those in the older adults cohort who were non-EU citizens had the highest reported rate of involuntary sharing/sofa surfing being their reason for entering EA (9%).

The small number of individuals in this group (n=439) in comparison to the general population, combined with their reasons for homelessness and previous accommodation, suggests that a small number of people in the older age range are vulnerable to losing their housing without alternatives being found.

People in this age cohort were the least likely to experience any contributory events prior to entering EA (45%). Those who did experience events prior to entering EA were more likely to have experienced life (28%) or homeless (6%) events. People in this group were also the least likely to experience multiple contributory events (7%), although of those who did experience multiple contributory events, almost half (3%) experienced a combination of homeless and life events.

Within the general Irish population, it is unusual for people in this age group to experience housing insecurity to the point at which homelessness is an issue. This is because the vast majority of people in this age group are either outright homeowners or social housing tenants. This is the only age group for whom housing is the overwhelmingly dominant issue as older adults are unlikely to experience contributory events, particularly multiple events. They become homeless predominantly from the private rental market where they were not receiving supports. It is likely that for this age group increased access to social housing and supported living facilities would be the most successful strategies for prevention of transitions into EA.

Table 5.9 Older Adults, Reason for Homelessness, Demographic Variables[1]

Reason[2]	Female	Male	Irish	EU	Non-EU	Total
Abuse	3%	1%	1%	1%	0%	1%
Asked to Leave Acc	27%	15%	19%	17%	21%	18%
Evicted	3%	6%	6%	6%	2%	5%
Family Circumstances	13%	11%	12%	11%	6%	11%
Involuntary Sharing	2%	4%	2%	3%	9%	3%
Leaving Care	0%	0%	0%	0%	0%	0%
Leaving Hospital	0%	2%	1%	1%	2%	1%
Leaving Prison	1%	4%	4%	1%	0%	3%
Mental Illness	5%	1%	2%	2%	0%	2%
No Income Source	0%	5%	2%	10%	2%	4%
Notice of Termination[3]	1%	3%	2%	3%	6%	3%
Notice to Quit[4]	7%	6%	5%	10%	4%	6%
RB[5]: Other	1%	1%	2%	1%	0%	1%
RB: Parent	0%	0%	0%	0%	0%	0%
RB: Partner	0%	6%	5%	3%	4%	4%
Substance Abuse: Alcohol	0%	2%	2%	0%	0%	1%
Substance Abuse: Drugs	0%	0%	0%	0%	0%	0%
Unknown	38%	35%	33%	30%	43%	36%

Note: 1. Source: PASS data compiled by the author; 2. Some of the categories reported contain unclear information; these categories may have been created based on information provided by individuals. Some categories have been combined on this basis, particularly those with extremely similarly worded descriptions; 3 & 4. 'Notice to quit' and 'notice of termination' are distinct legal terms – the former is a legal notice of the repossession of a dwelling by a landlord or bank, the latter is a legal notice instructing a tenant to vacate a dwelling. However, the data outlined in this table are self-reported and homeless people may be using these terms interchangeably; 5. RB: relationship breakdown.

Discussion

Historically, the main reason for homelessness occurring has been presumed to be addiction or mental health (Kuhn & Culhane, 1998; O'Neil et al., 2017; O'Sullivan, 2020). As identified in the contemporary international research which was reviewed

in Chapter Two, this presumption does not hold true in the modern context (Burt, 2016; Fitzpatrick, 2005).

Within the research population of EA users in Dublin which was examined for this thesis, drug dependency, alcohol dependency and mental health each accounted for 2% of self-reported reasons for homelessness. When additional information on PASS was examined to create the health event variables it was found that 7% of people reported some form of substance dependency when entering EA and 3% mentioned their mental health. In comparison to reported drug dependency in the general population of 0.6% (European Monitoring Centre for Drugs and Drug Addiction, 2020) drug dependency is far higher among this EA using population. In contrast, alcohol dependency is far higher among the general population (8.5%, see: WHO, 2018) than reported by the EA using single adults here. As is the case with alcohol dependency, reported mental health issues are far lower among this EA using group than among the general population (multiple measurments available, see: OECD, 2017; Healthy Ireland, 2021). While it is possible that the EA using population is experiencing fewer issues of mental health and alcohol dependency, it is also unlikely given the associated stress involved in the experience of becoming homeless. It is also possible that these issues are being under reported on PASS either due to the individual's belief that these issues are unrelated to their entering EA or because they are concerned about potential stigma. Further research into the reasons for these reported experiences may be able to shed some light on this uncertainty but clarification on these issues is beyond the scope of this thesis.

The link between leaving care or leaving prison and homelessness has also been strongly identified in the research on homelessness in Ireland and internationally (Johnson et al., 2015; Paula Mayock & Parker, 2017; Shinn, 2019). In comparison to other reasons for homelessness, leaving an institutional facility was reported by 5% of the research population as a reason for homelessness, which places it in the middle of the most cited reasons. However, it is important to note that only approximately 0.3% (figure calculated using figures from: HSE, 2019; Irish Penal Reform Trust, 2022; Irish Refugee Council, 2022) of the general Irish population has experience of living in institutional care, (i.e. of having lived in residential or foster care, in direct provision for asylum seekers or being incarcerated in prison). It is also possible that this 5% self-reported reason for homelessness is an under-representation of living in an

institutional facility, given that people may not have been asked directly if they had done so. What is clear is that, as has been found in other research, those who experience homelessness are more likely than the general population to have lived in another form of state-controlled accommodation.

As explained in Chapter Two, the research indicates that breakdown of family relationships and loss of housing are the key causes of homelessness (Anderson, 2001; Anderson and Christian, 2003; Fitzpatrick, Bramley and Johnsen, 2013; Chamberlain and Johnson, 2013). This view is supported by the data on users of emergency accommodation for homeless people in Dublin examined here. The majority of those among the research population who provided information on their housing tenure by answering the 'previous accommodation' question in PASS came from the private rental housing sector (23%) or living with family or friends (31%).

Reasons for homelessness cannot be assumed to be based on previous accommodation type. When asked about their 'reason for homelessness', 24% of the research population provided an answer involving personal relationships. 16% of people provided a reason directly relating to their accommodation circumstances as their reason for homelessness, half of whom provided reasons relating to financial difficulties ('no income source' and 'eviction due to rent arrears/failure to pay rent'). When combined, these three reason types (relationships, accommodation, income) were provided by 40% of people.

A key element of reaching the Irish government's goal of ending homelessness by 2030 will involve preventing transitions into homelessness from occurring. Homelessness prevention will require expanding already existing prevention services, but also improving their efficiency by improved access to information to inform better targeting and associated resourcing decisions. Resettlement supports after leaving care, direct provision and prison have already been introduced or expanded in Ireland in recent years (DSP, 2022; Irish Prison Service, 2022; TUSLA, 2017). These developments are supported by the analysis presented in this chapter, although further evaluation of these services specifically in terms of homelessness prevention is likely to be necessary. More information is needed in regard to mental health and substance dependency in order to establish the supports required and the number of people needing them. The need for further supports for those leaving institutional facilities is

evidenced in the data as experience of this type of accommodation is disproportionately higher in comparison to that of the general population.

The common issues faced by people in the research population are breakdown of personal relationships and loss of a private rental tenancy. Therefore, current prevention services (O'Sullivan, 2020) should work towards increasing access to accommodation and consider improving access to income supports, family mediation and mental health services. There are distinct differences in the self-reported reasons for homelessness and previous accommodation types between the age cohorts identified above. Based on these results, future prevention strategies should consider the individual's life stage as well as the reason(s) for being at risk of homelessness and the accommodation they are at risk of losing, in order to establish what supports and resources are required in order to prevent transitions into homelessness from occurring.

Conclusion

This chapter has presented the results of the first stage of applying the homeless transitions analytical framework which was tailored specifically for this thesis, adapted from the work of Beer et al (2011) and McNaughton (2008). The analysis presented has demonstrated the benefits of using this framework when analysing quantitative data on homeless emergency accommodation users' transitions into homelessness. It illuminates how contributory events, reasons for homelessness and accommodation change over the life course. A strong relationship is revealed by the analysis presented here between life course stage and risk of homelessness, reasons for homelessness, accommodation type and contributory events which preceded homelessness. This analysis confirms the results of previous research which has identified a relationship between homelessness and life course stage. It also adds a deeper understanding of the complex interaction between changing circumstances, contributory events and relationships prior to the transition into homelessness.

Transitions into homelessness change across the three age cohorts considered here. The people in the younger adult group were the most likely to have been previously living with family and the impact of breakdown of these relationships is clear in their reasons for homelessness. Middle-aged adults have shown that their reasons for homelessness are far more diverse than the other two age cohorts. For older adults,

having to leave their privately rented accommodation was a dominant aspect of their transition into homelessness, affecting over one third of this cohort.

Homeless prevention services are well developed in the Irish context and have been expanded in recent years (O'Sullivan, 2020). These supports have, thus far, focused primarily on young people and families, proving successful though complex (Focus Ireland, 2021). Analysis shows that many people in this group experienced relationship breakdown prior to entering EA. Although these factors were of most significance among the younger adult cohort, previously living with parents or family is in the top three previous accommodation types for all cohorts. Similarly, family circumstances are among the top three reasons for entering EA for all cohorts.

McNaughton (2008) identifies the importance of access to cultural, human, social, economic or material resources in preventing the transition into homelessness. For those who have limited access to one or more of these resources, losing accommodation can trigger a transition into homelessness. In the Irish context, there is a clear need for expanded access to alternative accommodation for those who find themselves at risk of homelessness due to the relationship, socio-economic or health challenges which face them. The evidence of the impact of low accessibility to the private rental market is particularly prominent for the later life cohort leaving private rented accommodation (34%) and entering EA rather than completing a successful housing transition to other accommodation. While less frequent among the younger age cohorts, leaving private rental accommodation was still a common form of previous accommodation type with over a quarter of middle-aged adults (28%) and 16% of younger adults entering from a private tenancy. Improving tenancy security in the Irish context should have a beneficial impact on people at risk of entering EA across the life course.

This chapter describes one aspect of the homeless experience, the transition into EA and the known contributory events which occurred prior to transition. Transition is part of a much bigger picture made up of both the individual and collective experiences of homelessness. By using self-reported data, it has been possible to present the perspectives of single adults in the Dublin region in terms of their reasons for entering EA and their descriptions of the accommodation they lived in prior to entering homelessness. What has been demonstrated here is that while experiences of entering homelessness change over the life course, personal relationships, living in

unstable accommodation and the experience of contributory events all play a part in how people transition into homelessness.

Chapter Six   Transitions Through Homelessness

Introduction

This chapter examines how people transition through emergency accommodation. It does so by examining the length of time people spent in EA, their consistency of service use and reported experiences of contributory events. Each of the homelessness transitions examined in this thesis is important for different reasons. Transitions through homelessness are significant because they encompass people's lived experiences of living in emergency accommodation and being homeless.

While the personal or emotional experiences of homelessness are beyond the scope of the PASS data examined here, qualitative research in the field describes a stressful and often scary experience which can have a negative impact on a person's wellbeing (Fitzpatrick, 2000; Hoffman & Coffey, 2008; McMordie, 2020). What is clear from the research on people's personal experiences of homelessness is that there is considerable diversity among the homeless population. These differences are particularly clear in terms of lived experiences of homelessness and the level of support needed to exit homelessness (Parsell, 2018). Homeless service providers must allocate resources according to their availability and service users' need. In the Irish context, it has been found that people who experience chronic homelessness use a disproportionately large amount of available resources (Waldron et al., 2019).

The analysis of these issues, presented in this chapter, is organised into five further sections. First, specific date treatment and analysis are presented. In the second section the results of the application of the analytical framework are discussed. These results include, the crosstabulations between age and transitions variables (consistency of EA use and breaks in EA use) and experiences of contributory events across the life course.. The third section discusses the results from the three analysis phases in relation to the life course. In the fourth section, this chapter reflects on the implications of transitions through homelessness for policy and for the wider research literature on homelessness. Finally, the conclusion of this chapter will identify the key findings of this analysis stage and summarises how these finding relate to the EA using population, service providers and policy makers.

Data Treatment and Analysis

Following data collation and cleaning, four rounds of analysis were conducted on the dataset of EA usage in order to illuminate transitions through homelessness. The first analysis stage of this research was to preform cluster analysis. As discussed in Chapter 4, this model has been used in both national and international research using similar data (Aubry et al., 2013; Benjaminsen & Andrade, 2015; Culhane & Kuhn, 1998; Kuhn & Culhane, 1998; Parker, 2021; Waldron et al., 2019; Wong et al., 1997). Thus, cluster analysis was used to interrogate the dataset based on a continuous variable (EA use period in days) and a categorical variable (EA use stability). The latter variable was specified with reference to the overall pattern of service use during the entire period spent in EA (i.e., between entering and ceasing use of EA) rather than on a day-by-day basis. Stable use was defined as 95%+ EA bed use monthly. This specific measure was selected to allow some leeway for data entry errors or short stays away from EA for reasons such as medical treatment or family visits. An additional variable was created titled 'consistent use': measuring percentages of stability in EA use (decreasing from 100% to 75% to 50% to 25% to 0%) across all months during which EA was used.

These variables were clustered using two-step cluster analysis in SPSS (see Chapter Four). The results returned were four good quality clusters (quality = 0.75) with a reasonable ratio between clusters (r = 2.11). The cluster groups (short stay; medium stay; long stay inconsistent; long stay stable) used during have been used here to examine how people transitioned through EA in terms of life stage, time spent in EA, consistency of service use and experience of contributory events. One two-way crosstabulation test has been used in order to examine contributory events. For this crosstabulation, contributory events were input as rows, consistency clusters as columns, and both were layered with the age groups variable. Chi-squared and Cramer's V tests were run as before. Experiences of contributory events may have occurred prior to or during the individuals EA use period.

In addition, crosstabulation tables were run for each age cohort to examine their consistency of service use and breaks in service use among EA users with different demographic characteristics. Chi-squared tests run as part of these crosstabulations did not return p values which indicated significance between these variables, they

have therefore not been reported. Crosstabulation tables have been included to show the distribution of gender and citizenship of consistency of service use and breaks in EA service use for each age cohort.

Transitions Through Homelessness

Age, Consistency and Breaks in EA Service Use

A significant difference was revealed between the long stay clusters discussed in Chapter Four and Culhane and Kuhn's (1998) chronic cluster. The long stay clusters accounted for 56% of the research population (37% inconsistent; 19% stable). Culhane and Kuhn's (1998) chronic cluster in comparison was 9.8%. The short stay and medium stay clusters each included 23% of the research population. These clusters are presented in Table 6.1, based on the three age cohorts: younger adults (18-34; n=1,618), middle-aged adults (35-54; n=1,612) and older adults (55+; n=439).

The top section of Table 6.1 details the breakdown of the consistency clusters and the age cohorts. The relationship between age and consistency of service use is significant, however the effect size (Cramer's V = 0.097) is small. As can be seen in Table 6.1, the largest group identified by the consistency clusters is the young adult long stay inconsistent group (39%). The smallest group was the younger adult, long stay stable group (13%). Middle-aged adults were the most likely to be long stay EA users. Younger adults were the most likely to have a short stay in EA. Older adults represented the largest proportion in the middle stay cluster compared to the other two age cohorts.

Although the cluster analysis conducted for this research did not return distinct stable use clusters for the medium stay group, consistency of use has been calculated for everyone who used EA for more than 30 days. Of those who used EA for more than 30 days (n = 2820), 58% did so inconsistently. However, the longest average use period was by 53-year-olds (n= 59) with inconsistent EA use (mean = 739.65 nights). Multiple breaks have been added as a single category as most people in this group did not specify a reason. The other types of breaks listed include people who only had one break in their EA use recorded. The most common type of break in service use was 'other' (4%) meaning that the reasons for these breaks were not included in case notes or as recorded tenancies; but there was confirmation on PASS that the person was not using EA or rough sleeping and/or case notes regarding their departure. The

most frequent known reasons for breaks in EA use were multiple (3%), hospital (2%) and returning to family or friends (2%). Failed tenancies were rare among the research population but did occur (1%); these tenancies tended to be in the private rental market. As was found with the consistency clusters the relationship between age and breaks in EA use was significant but weak (Cramer's V = 0.18).

Table 6.1 Time in EA and Breaks in Service Use[1]

	Younger Adults	Middle-Aged Adults	Older Adults	Total
Length of Time in EA and Service Use Consistency				
Short Stay[2]	24%	22%	22%	23%
Medium Stay[3]	23%	21%	26%	23%
Long Stay[4] Inconsistent	39%	37%	25%	37%
Long Stay Stable	13%	19%	27%	17%
Notes	X2: 68.395; p = <0.001; Cramer's V = 0.097			
Recorded breaks in EA Use Period				
Unknown	5%	4%	3%	4%
Prison	1%	1%	1%	1%
Hospital	1%	2%	4%	2%
Residential Treatment	0%	1%	1%	1%
Tenancy	2%	1%	1%	1%
Fam/Friends	2%	2%	1%	2%
Multiple	2%	3%	3%	3%
Total Breaks	14%	14%	12%	14%
Notes	X2: 32.962; p = 0.001; Cramer's V = 0.18			

Note: 1. Source: PASS Data compiled by author. 2. 1-29 days; 3. 30-182 days; 4. >182 days.

Age and Contributory Events

Table 6.2 examines the age groups, their experiences of contributory events and their consistency of EA use. It reveals that the strongest relationships are between age group and homeless events, age group and multiple contributory events, and age group and no contributory events. For each age cohort these relationships are within the moderate range of Cramer's V results (between >0.2 and <0.4). Experiences of life events (such as having children or moving country) were insignificant in this particular test. As discussed in the preceding chapter, this contributory event was also not significant for transitions into emergency accommodation. Its significance in terms of transitioning out of EA will be discussed in the next chapter.

McNaughton (2008) uses the concept of edgework in her research on transitions into and through homelessness. Specifically, she identifies mental health and drug use

(2008, p. 15) as well as traumatic events including rough sleeping as experiences of edgework. As described by one of the participants in McNaughton's research (2008, p. 129), rough sleeping

> is a very traumatising thing to do, to be homeless, to be rough sleeping, to go through all the violence, the begging. There's a lot to think about and once you get your house and look back on it, it can be frightening. You do have a lot of guilt and a lot of remorse for what you've done. (Keith, 34).

While substance dependency, mental health issues and engaging in rough sleeping were by no means the 'default' experience of the research population, minority of people did report having them. The homeless event most frequently experienced by the research population was engaging in sleeping rough (23%). The group most likely overall to have engaged in rough sleeping are younger adults who have long stay inconsistent EA use (41%). The group least likely to engage in rough sleeping were older adults who had a EA long stay but stable use (5%).

The most common combination of 'multiple contributory events' are homeless and life events experienced by younger adults (9%) and middle-aged adults (7%). Overall, those in the short stay EA use cluster were the most likely to have experienced no contributory events (45%). Of those who reported a health event (13%), the majority (10%) reported mental health or substance misuse as an issue. Most of the people who experienced mental health challenges or harmful substance use had long stay, inconsistent EA use (12%) and were middle-aged adults (1%). The group least likely to report mental health or addiction issues was the short stay EA users (n = 5%).

Table6.2 Life Stage, EA Use and Contributory Experiences[1]

	Short Stay	Medium Stay	Long Stay Inconsistent	Long Stay Stable	Total	Notes
Younger Adults						
Homeless	21%	38%	69%	35%	46%	X2 = 252.997; p =<0.001; Cramer's V = 0.395
Health	5%	11%	14%	8%	11%	X2 = 22.272; p =<0.001; Cramer's V = 0.117
Life	44%	43%	45%	43%	44%	X2 = .282; p = 0.963; Cramer's V = 0.013
Institutional	5%	10%	11%	13%	10%	X2 = 12.957; p = 0.005; Cramer's V =0.089
Multiple	15%	25%	44%	25%	30%	X2 = 108.158; =<0.001; Cramer's V = 0.259
None	40%	27%	14%	29%	26%	X2 = 85.052; p=<0.001; Cramer's V = 0.229
Middle-Aged Adults						
Homeless	20%	35%	65%	27%	41%	X2 = 243.130; p=<0.001; Cramer's V = 0.388
Health	5%	13%	22%	18%	16%	X2 = 52.067; p =<0.001; Cramer's V = 0.18
Life	45%	45%	41%	36%	42%	X2 = 7.808; p = 0.05; Cramer's V = 0.07
Institutional	2%	1%	5%	4%	3%	X2 = 14.188; p = 0.003; Cramer's V = 0.094
Multiple	13%	21%	42%	22%	27%	X2 =116.706; p =<0.001; Cramer's V = 0.269
None	41%	28%	16%	38%	29%	X2 = 85.332; p =<0.001; Cramer's V = 0.23
Older Adults						
Homeless	27%	32%	55%	24%	35%	X2 = 28.658; p =<0.001; Cramer's V = 0.379
Health	6%	12%	16%	8%	11%	X2 = 7.066; p = 0.07; Cramer's V = 0.142
Life	34%	35%	41%	36%	36%	X2 = 1.312; p = 0.726; Cramer's V = 0.055
Institutional[4]	2%	4%	3%	4%	3%	X2 = 1.219; =0.078; Cramer's V = 0.073;
Multiple	15%	21%	32%	14%	21%	X2 = 13.215; p = 0.004; Cramer's V = 0.174
None	45%	42%	21%	44%	38%	X2 = 191.085; =<0.001; Cramer's V = 0.207

Note: 1. Source: PASS Data Compiled by Author

Younger Adults

The analysis presented in this chapter highlights significant variation in transitions through homelessness across the life course. For instance, younger adults had the highest frequency of short stay EA use (24%) in comparison to those in the middle-aged or older adult cohorts (22%). Younger adults and middle-aged adults were more likely to have had a break in service use during their EA use period (14%) than older adults. Although younger adults were less likely to experience long stay EA use (52%), than older members of the research population, younger adults were more likely than average to be long stay inconsistent users of EA (39%). Of those in the younger adult cohort who used EA for more than 30 days (n = 1226), 53% did so inconsistently (for more than half the months in their EA use period), the highest rate of inconsistent use across the three cohorts.

Table 6.3 disaggregates the consistency of service use and breaks in service use of younger adult age cohort and the demographic variables gender and citizenship. Women in this age cohort were more likely to have experienced short (27%) and long-term stable (18%) EA use than men (23%; 11%). However, men were more likely to have experience long term inconsistent EA use (42%) than women (31%). EU citizens had the highest reported rate of using EA short term (30%) and the lowest of long-term stable use (8%) when compared to Irish (22%;14%) and non-EU (26%;18%) citizens.

Men had more breaks in their EU use (14%) than women (13%), however women were more likely to take multiple breaks (3%) than men (2%). Irish citizens were more likely to have experienced breaks in EA use (15%) than EU (13%) or non-EU (11%) citizens. Nether women and/or non-EU citizens had breaks recorded for prison stays. People in this cohort also did not have recoded breaks in EA use while in residential treatment (0%).

Table 6.3 Younger Adults, Demographic Variables Consistency of Service Use and Breaks in EA Use[1]

	Female	Male	Irish	EU	Non-EU	Total
Consistency of Service use						
Short Stay	27%	23%	22%	30%	26%	24%
Medium Term	23%	23%	24%	21%	22%	23%
Long Term Inconsistent	31%	42%	40%	40%	34%	39%
Long Term Stable	18%	11%	14%	8%	18%	13%
Breaks in EA Use						
Unknown	4%	6%	5%	5%	5%	5%
Prison	0%	2%	1%	2%	0%	1%
Hospital	2%	1%	2%	2%	0%	1%
Residential Treatment	0%	0%	0%	0%	0%	0%
Tenancy	2%	2%	2%	0%	3%	2%
Fam/Friends	2%	2%	2%	1%	2%	2%
Multiple	3%	2%	2%	3%	0%	2%
Total	13%	14%	15%	13%	11%	14%

Note: 1. Source: PASS Data Compiled by Author

Younger adults were the least likely to have experienced no contributory events (26%) overall. Among the younger adults who had used EA for more than 6 months inconsistently, 85% had experienced at least one contributory event. One of the biggest differences between this age cohort and the older members of the research population was in terms of institutional events. 10% of younger adults had experienced an institutional event, in contrast to just 3% of the older groups. This may reflect the fact that younger adults were more likely to have been in state foster or residential care than older members of the research population – because these services have expanded significantly in recent decades. Alternatively, it may reflect the fact that homeless emergency accommodation providers are more likely to ask younger adults about specific experiences prior to becoming homeless (like living in state care as a minor) when assessing their needs and registering this information on the PASS database.

Younger adults who used EA inconsistently for more than six months had the highest rate of experiencing homeless events (69%) across all the age groups in the research population. They were also the most likely to experience multiple events (30%).

However, they were less likely to experience health events (11%) than older members of the research population.

The younger adult cohort was the most likely to experience an additional homeless event (46%). The additional homelessness event experienced by younger adults was most commonly engaging in rough sleeping (26%). Younger adults are, in short, more likely to experience edgework (risk taking behaviour) than the older cohorts.

Middle-Aged Adults

Middle-aged adults represent the section of the research population most likely to experience long stay EA use (56%). Of the research population who had been in EA for more than 6 months, 57% were aged 35 or older. Middle-aged who used EA for more than 30 days (n = 1,250) were more likely to do so stably (53%) than their younger peers. Based on the previous findings by Waldron and colleagues (2019) we can assume that middle-aged adults in the research population who used EA long-term are also using a disproportionate amount of resources.

In terms of experiencing homeless events middle-aged adults are in the middle (41%) of the three age cohorts. However, middle-aged adults who were also in the 30-day group had the lowest reported homeless events experienced (20%). Just over a quarter of middle-aged adults experienced multiple contributory events (26%); although those who used EA for less than 6 months consistently had the lowest rate of multiple contributory events (15%) of the three age cohorts. Middle-aged adults are again in the middle of the three age cohorts in terms of experiencing institutional events (3%). However, those who used EA for less than 6 months inconsistently had the lowest rate of institutional events experienced (1%) of the three age cohorts considered. As was found among the younger adulthood cohort, middle-aged men were more likely to use EA long term and inconsistently (38%) than women (31%). Middle-aged women's EA use is more evenly distributed across the four consistency groups than either younger or older women, as is EA use by non-EU citizens. EU citizens were more likely to experience long term inconsistent EA use (42%) than Irish (37%) or non-EU (28%) citizens.

Middle-aged women were more likely to have had a break in EA service use (19%) than middle-aged men (13%), in both the younger and older age cohorts men (14%; 13%) took more breaks than women (13%; 10%). 1% of both Irish and EU citizens

took breaks in EA use to attend residential treatment, women and non-EU citizens did not (0%).

Table 6.4 Middle-Aged Adults, Consistency of Service Use and Breaks in EA Use[1]

	Female	Male	Irish	EU	Non-EU	Total
Consistency of Service use						
Short Stay	24%	22%	20%	27%	25%	22%
Medium Term	22%	21%	21%	19%	26%	21%
Long Term Inconsistent	31%	38%	37%	42%	28%	37%
Long Term Stable	23%	18%	22%	11%	21%	19%
Breaks in EA Use						
Unknown	5%	4%	3%	6%	3%	4%
Prison	2%	1%	1%	1%	1%	1%
Hospital	2%	2%	2%	2%	0%	2%
Residential Treatment	0%	1%	1%	1%	0%	1%
Tenancy	1%	1%	1%	1%	0%	1%
Fam/Friends	2%	2%	2%	2%	1%	2%
Multiple	6%	3%	4%	2%	0%	3%
Total	19%	13%	15%	14%	7%	14%

Note: 1. Source: PASS Data Com piled by the Author

Notably middle-aged adults had the highest rate of health events (16%) among the research population and middle-aged adults who had used EA for more than 6 months inconsistently were the most likely to report such an event (22%). When health events are disaggregated, they reveal that middle-aged adults were the section of the research population most likely to have reported experiencing a mental health or addiction issue (11%). This may be because homeless people aged between 35 and 54 have experienced these events more often than the rest of the research population. Alternatively, it may reflect the fact that they are more likely to report these events; or it may be because no relevant age specific policy measures or services are provided which target middle-aged adults so their additional needs (i.e. in addition to their lack of housing) go unmet.

Older adults have the highest rate of stable EA service use across all three groups. 70% of this age cohort used EA consistently over more than half the months in their EA use period; in comparison to 53% of the middle-aged adults and 47% of the younger adults. This cohort also had the lowest frequency of breaks in use during their time in EA (12%). Although less likely than middle-aged adults (16%) to report a health event (11%), older adults were more likely than their younger peers to have a break in EA service due to a hospital stay (4%).

Older women were less likely to have a short stay in EA (19%) than older men (22%), unlike the younger age cohorts where the reverse is true. Like the middle-aged adults, older EU citizens were more likely to use EA long term inconsistently (33%) than Irish (23%) or non-EU (19%) citizens. Non-EU citizens within this cohort were not recorded to have taken breaks in their EA use (0%). Half (5%) of the recorded breaks in EA use by older women was to attend hospital care. This is also the only age cohort which recorded women taking breaks in EA use to attend residential treatment (1%). All older adults who were recoded as having taken a break in their EA use to attend residential treatment were Irish citizens.

Table 6.5 Older Adults, Consistency of Service Use and Breaks in EA Use[1]

	Female	Male	Irish	EU	Non-EU	Total
Consistency of Service use						
Short Stay	19%	22%	22%	17%	30%	22%
Medium Term	25%	26%	27%	27%	21%	26%
Long Term Inconsistent	25%	25%	23%	33%	19%	25%
Long Term Stable	32%	26%	29%	23%	30%	27%
Breaks in EA Use						
Unknown	0%	4%	3%	4%	0%	3%
Prison	0%	1%	1%	0%	0%	1%
Hospital	5%	3%	4%	2%	0%	4%
Residential Treatment	1%	1%	1%	0%	0%	1%
Tenancy	1%	1%	1%	2%	0%	1%
Fam/Friends	2%	1%	1%	1%	0%	1%
Multiple	1%	3%	3%	3%	0%	3%
Total	10%	13%	14%	13%	0%	12%

Note: 1. Source: PASS Data Compiled by Author.

Older adults were the least likely, overall, to experience multiple contributory events (19%) and the most likely to experience no contributory events (38%) among the research population as a whole. Older adults who used EA for less than six months stably had an even higher likelihood of not reporting contributory events experienced (45%). They also have the lowest overall rate of experiencing homeless events (35%). Older adults who used emergency accommodation for more than six months were more likely to exhibit stable EA usage patterns (27%) than inconsistent usage patterns (25%). The older adults group also reported the lowest rate of mental health and addiction issues (5%) and were the least likely to engage in rough sleeping (18%) among the research population.

Therefore, the transitions through homelessness experienced by older adults are distinctive amongst the research population examined here. Older adults exhibit the most stable emergency accommodation usage patterns, the fewest contributory events and the lowest experience of edgework. This indicates that other issues (such as housing affordability) may be more significant triggers of homelessness among older adults. It is possible (as has been found in Finland, Pleace *et al.* 2015) that some older adults may not wish or be able to live independently. In this case, alternative forms of accommodation may be needed for older homeless people such as retirement communities or long-term supported housing.

Discussion

One of the long-standing objectives of government both regionally (Homeless Agency, 2001) and nationally (DoHLGH, 2008) has been to end long-term homelessness. According to the definition of long-term homelessness used by local and national government in Ireland, the maximum stay by any individual should be 182 nights (six months) in EA (Homeless Agency, 2001). Under half (46%) of the research population used EA for six months or less. The average length of EA use was 7.8 nights for the short stay cluster; 102.778 nights for the medium stay cluster; 458.01 nights for the long stay stable cluster; and 558.56 nights for the long stay inconsistent cluster. In total, 260 people stayed in EA for one night only. At the other end of the scale, 137 people had an EA use period of over 1,000 nights. Based on patterns of EA use, it is likely that there are people using EA for longer than the time period considered in this thesis.

As shown in Table 6.3, younger adults are less likely to use EA consistently compared to their older peers. Consistency also declines based on the length of time spent in homelessness. 16% of the research population used EA inconsistently for a medium stay versus 37% who used EA far a long stay and inconsistently. Some people in these groups have left EA and returned.

In total, 14% of the research population had a break in their EA use recorded on PASS. Most of these breaks (80%) were taken by people in the long stay inconsistent use group with the next highest rate being among the long stay stable group (15%). In general, when people from the short or medium stay groups left EA, they did not return. What these patterns of service use show us is that those who can leave EA, do. As has been found in previous research (Parsell et al., 2014) people in the research population did attempt to find new accommodation for themselves, however of the recorded departures from EA to a tenancy or family/friends (discussed more in the next chapter), 12% returned to EA during the data collation period.

Of the total research population, 72% had contributory events recorded on PASS. Of these, life events were the most frequent (23%), although, as discussed above, the relationship was not found to be significant when tested. However, contributory events do provide insight into the experiences of the research population outside of their EA use. As discussed in Chapter Four, there is a disproportionate number of EU and non-EU citizens among the research population in comparison with the general population. The increased risk of homelessness for immigrants has been found in other EU countries (Pleace, 2011). The challenge presented by having children was also evident in the PASS data. While the number of individuals was too small to report, some people (particularly men) stayed in single adult hostels most of the time but in hotels when they had access to their children. These children have not been counted as homeless as their primary residence was in another household but the existence of these parents in the research population speaks to the complexity of navigating homelessness while trying to maintain a relationship with one's child(ren).

Younger and middle-aged adults had issues of particular concern in relation to their transitions through homelessness. Younger adults used EA the most inconsistently across the medium and long stay groups (47%). They were also the most likely to have experienced a homeless event (45%, including multiple event combinations) and

to have engaged in rough sleeping (26%). They were likewise the most likely to have children (8%). Middle-aged adults were the most likely to have long stay EA use (56%); and the most likely to be immigrants (33%), meaning that additional language supports may be needed in order for them to proactively access services. Language barriers to accessing services have already been found in other EU countries (Pleace, 2011). It should be noted that there is a service in Dublin, the Mendicity Institution, which provides interpretation services, access to computers and English language supports. However, target supports specifically for middle-aged adults are not available in Dublin.

Conclusion

Chapter Six has examined transitions through homelessness. It has shown that the majority of the research population used EA for more than 6 months (54%) and were inconsistent in their service use (37%). Although breaks in service use were recorded, these were experienced by a minority of the research population (14%). Contributory events on the other hand were experienced by most of the research population, 44% reported experiencing one contributory event and 28% reported multiple contributory events.

Remaining in EA for extended periods risks individuals becoming reliant on the resources available to those in institutional accommodation, and facing the additional challenges that follow (Khan, 2010). Ireland has a long history of forced institutionalisation, analyses of which has demonstrated beyond any doubt the negative impact which unnecessary institutionalisation can have on a person's life (O'Sullivan & O'Donnell, 2007). EA is designed for short-term use and even if Ireland achieves 'functional zero' levels of homelessness in the future, temporary emergency accommodation will likely always be a necessary part of the housing system. Functional zero levels would be reached when there are enough housing, supports and appropriate services to ensure that the smallest number of people possible enter the EA system and then for a very short period of time (Turner et al., 2017).

As analysis presented in this chapter demonstrates, those who use EA for its intended purpose (the short stay group who use EA for 30 days or less) have less engagement with services and are unlikely to return to EA once they have left. Notably they are also less likely to have experienced contributory events. This suggests that if

homelessness prevention strategies had been effective, the majority of this group would never have entered EA in the first place. Most of this group left EA without supports such as SLÍ or Housing First and nor do they appear to need help in finding alternative accommodation.

Stable service use appears to reduce the number of homeless events. 29% of the long stay stable group had a health experience recorded on PASS, compared to 66% of the long stay inconsistent group. These events include rough sleeping and the challenges associated with it such as violence (Sanders & Albanese, 2016) and exposure (Kusmer, 2002). Therefore, reducing the number of these experiences by promoting increased stability of emergency accommodation service use and decreased time in EA would be beneficial to this population. The most successful strategy internationally to date to achieve this has been the provision of single occupancy rooms in emergency accommodation with onsite services, as seen in the Finnish Housing First Model (Shinn & Khadduri, 2020). In addition to the benefits of not sleeping rough, this approach is likely to have the added benefit of decreasing the stress and fear experienced by service users in hostel style accommodation (McMordie, 2020).

Chapter Seven   Transitions out of Homelessness

Introduction

Moving people out of homelessness and into stable accommodation is the ultimate goal of policy makers and service providers (Government of Ireland, 2021a). However, this is a significant challenge in the context of the current housing market in Ireland which has seen significant house price and rent inflation as well as supply shortages in recent years. As a result, it is a seller's market whereby only a select few can afford to rent or buy while prices keep rising (Byrne, 2020; Waldron, 2021). As explained in Chapter One, recent legislative and policy action has yet to have a significant positive impact for people trying to access the housing market. The challenges of enabling housing access are heightened when trying to move homeless people from emergency accommodation to long-term housing. In addition to the high cost of private rentals and low supply of social housing, homeless people may face discrimination when trying to access housing (Grotti et al., 2018). To overcome these issues, more social housing and anti-discrimination initiatives may be needed to increase resettlement following homelessness.

In order to achieve the goal of enabling exit from homelessness, it is important to understand how the EA using population have previously transitioned out of homelessness. This is the focus of the analysis presented in this chapter. Transitions out of homelessness are, ideally, to a new home where a person can remain for as long as they wish. The supports available in Ireland to help people leave homelessness tend to be financial or accommodation based. However, as discussed in Chapter Two, homelessness has a psychological impact on people who live through it (Gerstel et al., 1996; Goodman et al., 1991; McNaughton, 2008). Emotional barriers to exiting homelessness include fear, as well as a lack of self-esteem and institutional infantilization (Harvey, 2008). In contrast, securing housing is associated with feelings of empowerment, maturity/adulthood, success and confidence (Farrugia, 2016). Leaving homelessness may also provide the opportunity for social mobility to occur, as it may act as a starting or jumping off point for people to improve their future circumstances (Marr, 2012). The psychological side of leaving homelessness is

therefore an important aspect for service providers to consider when supporting each individual out of homeless accommodation.

As has been discussed in the previous chapters, there is a significant range of experiences and needs across the EA using population. Research on families who use EA has shown that some supports, such as housing ready training (Gerstel et al., 1996) or SLÍ (Parker, 2021) are not for everyone. This is because many people have lived in accommodation independently prior to their experience of homelessness (Gerstel et al., 1996; Parker, 2021). Given the high percentage of the research population who entered EA from their own accommodation (29% from private rental/homeowner/social housing) it is likely that the same is true for them.

The remainder of this chapter is organised into five sections. First, the treatment and analysis of the data on transitions out of homelessness among the research population will be outlined. Then the results of the data analysis will be discussed in relation to accommodation people moved to and the supports they received, after which the experience of contributory events will be examined. These results will be discussed in relation to the three age cohorts established for this thesis (younger adults= 1,618; middle-aged adults = 1,612; older adults =439 individuals). Next, this chapter will reflect on the data analysis findings in relation to the wider literature, service provision and policy. The conclusions of this chapter examine successful exits and the barriers to exit experienced by the research population and the implications these experiences have for service provision and system design.

Data Treatment and Analysis

The analytical framework devised for this thesis and outlined in Chapter Three will be applied in this chapter to departures from EA. Three variables were created for this analysis stage: 'EA Status', 'Still in EA' and 'Departure Reason'. These three variables were derived from the variable 'Accommodation Status', which includes all known information as to the research population's EA use and departure status at the end of the data collation period. EA status includes three possibilities:

- LTB - the person has been placed in a long-term bed in EA on or before the 31st of March 2019. Long-term beds are booked either on a 'rolling' (indefinite/ongoing) basis or for a specified period of time (usually between one

and six months based on case notes). This contrasts with the usual system whereby EA beds are booked on a night-by night basis.

- EA ONO – the person used EA during the week starting the 25th of March 2019. Their EA bed was for 'one night only' booked through the central placement service.
- Departed – the person ceased using EA before the 25th of March 2019.

Table 7.1 *Long-Term Bed Occupancy, Age Cohort and Consistency Cluster[1]*

	Younger Adults	Middle-Aged Adults	Older Adults	Total
Medium Stay	2%	4%	4%	3%
Long Stay Inconsistent	10%	13%	9%	11%
Long Stay Stable	6%	12%	11%	10%

Note: 1. Source: PASS data compiled by researcher.

The second variable 'Still in EA' is a binary variable where 0 = departed and 1 = Still in EA (LTB/EA ONO). 'Departure Reason' includes information as to whether people had departed without providing a reason, if people had exited EA to a tenancy or had departed EA for a known reason, to a destination other than specified accommodation (family or friends, reunite with children, another region/country, left the country). This new variable only includes reasons for departure which account for over 1% of the research population. They are:

- NDR - No Departure Reason.
- LTA – Long-Term Accommodation: this is supported accommodation specifically for homeless people outside the EA system.
- HAP - Housing Assistance Payment in the Private Rental Market.
- PRA - Private Rental Accommodation through own means.
- Social Housing - Tenancies in local authority or approved housing body provided social housing.
- Fam/Friends – Moved in with family or friends.
- Had/Reunited Children - Became a parent or was reunited with children under the age of 18.

- Other - options which fell below 1% of the research population: deceased, prison, residential treatment, moved country, confirmed departure without details, housing first, hospital and barred from service.
- Other Region - Moved to another region in Ireland.

Other variables included in the analysis presented in this chapter are: age; Assessment of Housing Need (AHN) completed; support after leaving EA; consistency clusters; and contributory events.

One of the aims of this thesis is to use data analysis to establish transitions out of homelessness. An important aspect of exploring these transitions is to look at the types of accommodation to which homeless people moved on leaving emergency accommodation, how many people received support once they left EA and where transitions out of emergency accommodation vary across the life course. We also examine whether individuals experienced specific events before or during their stay in EA and if these change over the life course.

To achieve this aim, three stages of data analysis were conducted. Two of these were intended to explore whether there is a correlation between life course and the different variables relating to exiting EA. To do this, one-way crosstabulations were used to examine distributions of EA status, departure reason, AHN completion, supports after leaving EA and contributory events across each of the age cohorts. In keeping with the mode of analysis of other stages of homeless transitions presented in Chapters Six and Seven, Chi Squared and Cramer's V tests were conducted on all crosstabulations to establish probability of independence and the strength of the relationship between variables. In common with the analysis of transitions into and through homelessness presented in the two preceding chapters, experiences of contributory events prior to or during the EA use period were also taken into account in the analysis of transitions out of EA presented here. For crosstabulations where small numbers occurred in subcategories, total significance has been reported rather than significance for each category.

Additional demographic information regarding gender and citizenship has been included in the discussion for each age cohort. The crosstabulations run for the early and middle-aged cohorts, the EA status 'still using EA' and citizenship were found to have a significant p value and have been reported in this chapter. The other

crosstabulations run for this stage did not return significant p values and have not been reported.

Transitions Out of Homelessness

Rates of Emergency Accommodation Departure and Continuing Usage

By the week starting the 25th of March 2019, 69% of the individuals who had started using emergency accommodation between 2016 and 2018 had ceased using EA in the Dublin Region (see Table 7.1 below). Although it might be expected that at the end of the data collation period those who first presented in 2016 would have the highest rate of departure from EA, there was still a significant minority (23%) using EA, mostly in long-term beds. Those who first used EA in 2016 and who were still in EA in March 2019 had used emergency accommodation for a minimum of 27 months.

Overall, a significant minority of the research population remained in EA at the end of the data collation period (31%). Of the 1,131 individuals who remained in EA, most (77%) had taken occupancy of a long-term bed on or before the 31st of March 2019. The remaining 23% of this group used an EA bed on a one night only basis meaning that they booked their EA bed each day they needed it. Inclusion in this 'one night only' group was determined on the basis of a bed being used between the 25th and 31st of March 2019.

Table 7.2 Year First Presented and EA Use Status Week Ending 25.03.2019[1]

	2016	2017	2018	Total
Long-Term Bed	19%	21%	30%	24%
EA One Night Only	4%	10%	8%	7%
Ceased Using EA	77%	69%	62%	69%
Total Number	1,166	1,171	1,332	3,669

Note: 1. Source: PASS data compiled by the author.

As outlined in Table 7.3 below, there is a moderate relationship between departure reason, consistency cluster and age (Cramer's V = 0.248). Most people who ceased using EA (n = 2,538) left without providing information on the accommodation type they moved to or securing help to access accommodation from a homeless service provider (57%). Of the known accommodation moved to, HAP was the most common departure type (17%). The next most common was social housing (7%). This is likely

due to HAP being the most accessible in terms of receiving financial support for housing. As discussed in Chapter One, social housing is in high demand in Ireland, particularly one- or two-bedroom units (Housing Agency, 2020) suitable for the homeless single adults examined in this thesis. While there is no preferential treatment for people who use EA in the allocation of social housing, homeless people in Dublin can qualify for discretionary increases in private rent subsidies under the Housing Assistance Payment (HAP) (hap.ie, 2021). These increases make the private rental market more accessible to people who are trying to leave EA. When combined, these two forms of housing account for 24% of the EA departure reasons listed in the PASS database for the research population. In comparison, departures to the private rental market without assistance account for 2%. This may be an underrepresentation as it is possible that additional EA users who are able to source their own accommodation in the private market are not providing their departure reason to homeless services. However, the importance of social housing and housing subsidies remains high for this group as so many people who use EA are clearly unable to find new accommodation without support, be it formal support from the state or informal support from family or friends.

Additional variables were also examined to further illuminate transitions out of homelessness. The first is having completed an Assessment of Housing Need (AHN) with the local authority responsible for the area where they live. An AHN provides information as to the type of accommodation a person requires including the number of bedrooms and any accessibility requirements. Establishing if an AHN has been completed is important to the analysis of departures for a number of reasons. First, they are a requirement for being added to the social housing list in a region. Second, completion of AHNs is required by the DRHE in order to better inform local authorities and service providers of a service user's need. Third, completion of an AHN is an indication that a person has engaged with a local authority or service provider beyond the minimum requirements of registering on PASS. Of all the variables considered here, there is a moderately significant relationship between age, consistency cluster and AHN (Cramer's V = 0.37). As can be seen on Table 7.4, as length of time in EA increases, so does the likelihood of having an AHN completed. This is particularly true for those who have stable EA use and may indicate that AHNs are more likely to be completed for those who engage with services than those who do not.

Table 7.3 Departure Reason, Age and Consistency[1]

	NDR[2]	HAP[3]	Social Housing	Family/Friends	LTA[4]	PRA[5]	Other	Other Region	Had/Reunited Children
Younger Adults									
Short Stay	73%	10%	1%	5%	1%	1%	4%	4%	1%
Medium Stay	53%	23%	2%	5%	2%	2%	6%	5%	2%
Long Stay Inconsistent	66%	14%	3%	1%	1%	0%	5%	4%	6%
Long Stay Stable	19%	44%	16%	4%	1%	3%	5%	1%	7%
Total	61%	18%	3%	4%	1%	1%	5%	4%	3%
Middle-Aged Adults									
Short Stay	75%	10%	1%	4%	0%	4%	4%	2%	0%
Medium Stay	50%	25%	4%	3%	2%	2%	8%	4%	1%
Long Stay Inconsistent	58%	15%	8%	3%	3%	4%	5%	3%	0%
Long Stay Stable	22%	33%	19%	5%	7%	8%	6%	1%	0%
Total	58%	18%	6%	4%	2%	4%	6%	3%	0%
Older Adults									
Short Stay	68%	7%	7%	7%	0%	2%	4%	2%	1%
Medium Stay	33%	16%	31%	1%	4%	3%	10%	2%	0%
Long Stay Inconsistent	41%	11%	26%	2%	7%	2%	8%	3%	0%
Long Stay Stable	16%	7%	64%	1%	7%	0%	4%	0%	0%
Total	41%	11%	30%	3%	4%	2%	7%	2%	0%
Total									
Short Stay	73%	10%	2%	5%	0%	2%	4%	3%	1%
Medium Stay	49%	23%	7%	4%	2%	2%	7%	4%	1%
Long Stay Inconsistent	61%	14%	7%	2%	2%	2%	5%	3%	3%
Long Stay Stable	19%	31%	29%	4%	5%	4%	5%	1%	3%
Total	57%	17%	7%	4%	2%	2%	5%	3%	2%
Notes:	X2= 466.625; p= <0.001; Cramer's V = 0.248								

Note: 1. Source: PASS data compiled by author; 2. No Departure Reason; 3. Housing Assistance Payment; 4. Long-Term Accommodation; 5. Private Rental

As explained in Table 7.4, the relationship between age cohort, consistency cluster and EA use status was significant and strong (Cramer's V = 0.475). The strength of relationship is predictable given the fact the fact that none of the short stay group were still using EA whereas the majority of the long stay stable group remained in EA. One consideration in relation to the medium stay group is that some of those who remained in EA at the end of the data collation period may now belong in the long stay groups. However, this seems unlikely as the lower rate of continued EA use among this cluster indicates that they are distinct in their EA usage from the long stay or short stay groups, having the specific pattern of using EA for a period of 1-6 months before departing the service.

Receiving support (in addition to housing support) after leaving EA is not a common experience among the research population, of which 7% had post-EA support recorded on PASS. The two consistency groups most likely to receive support are the medium stay group (12%) and the long stay stable group (12%). Those who received support after leaving EA (n = 271) primarily visited their support service (83%) rather than receiving SLÍ at home (17%). A total of five people from this research population were listed as receiving Housing First support.

Experiencing Contributory Events

Most of the research population have at least one contributory event reported (72%). Homeless events are the most common as 42% have reported at least one. Table 7.5 includes all the contributory events experienced by the research population, including the percentages of people who experienced each combination of events.

These data reveal the diversity of experiences across the research population and speak to the complexity of identifying relationships between homeless transitions and contributory events. The contributory events examined here are those reported on PASS prior to, or during, members of the research population's EA use period. Table 7.5 breaks the experiences of contributory events down by age cohort and EA use status at the end of the data collation period. By separating those still using EA and those who had departed the service, the differences between them can be more clearly seen. This is relevant to this discussion because those who had ceased using EA were more likely not to have experienced any contributory events, whereas those who remained in homelessness were more likely to have experienced multiple such

events. Given the weak statistical relationship between these variables, the explanation for this is beyond the scope of this thesis but may be relevant in future qualitative projects.

Table 7.4 Consistency and Support[1]

	Younger Adults	Middle-Aged Adults	Older Adults	Total
AHN				
Short Stay	39%	36%	36%	37%
Medium Stay	65%	65%	66%	65%
Long Stay Inconsistent	74%	72%	78%	73%
Long Stay Stable	90%	89%	93%	90%
Total Age Cohort	65%	66%	70%	66%
Notes	$X2=198.859$; $p=<0.001$; Creamer's V= 0.351	$X2=218.813$; $p=<0.001$; Creamer's V= 0.368	$X2=86.179$; $p=<0.001$; Creamer's V= 0.443	$X2= 501.667$; $p= <0.001$; Cramer's V= 0.37
Still Using EA				
Short Stay	0%	0%	0%	0%
Medium Stay	13%	20%	17%	16%
Long Stay Inconsistent	43%	51%	45%	47%
Long Stay Stable	51%	67%	43%	57%
Total Age Cohort	27%	36%	27%	31%
Notes	$X2=331.119$; $p=<0.001$; Creamer's V= 0.452	$X2=427.013$; $p=<0.001$; Creamer's V= 0.515	$X2=73.455$; $p=<0.001$; Creamer's V= 0.409	$X2= 826.258$; $p = <0.001$; Cramer's V = 0.475
Supports After EA				
Short Stay	3%	1%	4%	2%
Medium Stay	12%	7%	25%	12%
Long Stay Inconsistent	4%	6%	15%	6%
Long Stay Stable	9%	8%	27%	12%
Total Age Cohort	6%	6%	18%	7%
Notes	$X2=37.01$; $p=<0.001$; Creamer's V= 0.151	$X2=20.214$; $p=<0.001$; Creamer's V= 0.112	$X2=21.919$; $p=<0.001$; Creamer's V= 0.223	$X2= 21.733$; $p= <0.001$; Cramer's V = 0.149

Note: 1. Source: PASS data compiled by author

Table 7.5 Life Stage, Contributory Events and EA Status[1]

Still Using EA	Younger Adults		Middle-Aged Adults		Older Adults		Total	
	No	Yes	No	Yes	No	Yes	No	Yes
Number of Contributory Events Experienced								
None	28%	18%	31%	25%	41%	30%	31%	23%
One	44%	45%	47%	39%	41%	44%	45%	42%
Multiple	28%	37%	22%	36%	18%	26%	24%	35%
Notes	X2 = 21.352; p = <0.001; Creamer's V = 0.115		X2 = 33.984; p = <0.001; Creamer's V = 0.145		X2 = 5.200; p = 0.074; Creamer's V = 0.109		X2 = 52.107; p =<0.001; Cramer's V = 0.119	
Type of Contributory Event Experienced								
Homeless	16%	24%	16%	16%	13%	20%	15%	19%
Health	3%	3%	4%	5%	2%	2%	3%	4%
Life	23%	17%	27%	18%	24%	23%	25%	18%
Institutional	2%	2%	0%	1%	2%	0%	1%	1%
Homeless and Health	3%	5%	6%	10%	5%	9%	5%	8%
Homeless and Life	15%	18%	11%	18%	9%	11%	13%	17%
Homeless and Institutional	3%	4%	1%	1%	2%	2%	2%	2%
Health and Life	1%	0%	1%	1%	0%	1%	1%	1%
Health and Institutional	0%	0%	0%	0%	0%	0%	0%	0%
Life and Institutional	1%	0%	1%	0%	0%	0%	1%	0%
Homeless, Health and Life	2%	4%	2%	4%	2%	2%	2%	4%
Homeless, Health and Institutional	1%	0%	0%	1%	0%	1%	0%	1%
Homeless, Life and Institutional	2%	4%	1%	1%	0%	0%	1%	2%
Health, Life and Institutional	0%	0%	0%	0%	0%	1%	0%	0%

Note:1. Source: PASS data collated by the author.

Transitions Out of Homelessness Across the Life Course

Younger Adults

At the end of the data collation period, 73% of those in the younger adult cohort had ceased using EA. Those in this cohort are the most likely to have left EA without informing their service provider of their destination. HAP tenancies were the most frequent exit accommodation for younger adults. They were most likely to receive support when in HAP tenancies (24%), compared to 10% of the middle-aged group and 21% of those in the older adult cohort. Younger adults were also the most likely to move in with family or friends (3%). Of the three age cohorts, younger adults were the least likely to have moved to social housing (3%). Despite these higher rates of use of the housing allowance payment and informal support by family/friends, those in the younger adult group were unlikely to receive SLÍ support when they exited EA. Overall 6% of this group received visiting support in their new accommodation.

Table 7.6 Younger Adults, Demographic Variables and Departure Reason[1]

	Female	Male	Irish	EU	Non-EU	Total
NDR	49%	65%	59%	71%	52%	61%
HAP	26%	16%	18%	10%	32%	18%
Social Housing	3%	3%	3%	2%	4%	3%
Family/Friends	4%	3%	4%	3%	2%	4%
LTA	1%	1%	1%	2%	0%	1%
PRA	1%	1%	1%	1%	0%	1%
Other	4%	5%	6%	4%	4%	5%
Other Region	4%	4%	3%	6%	5%	4%
Had/Reunited Children	6%	2%	4%	3%	1%	3%

Note: 1. Source: PASS Data Compiled by Author.

As shown in Table 7.6, younger women were less likely to leave EA without providing a departure reason (49%) than men (65%). They were also more likely to depart to a HAP tenancy (26%) than men (16%). Younger women were also more likely to depart their single adult EA service due to having or being reunited with children (6%) than younger men (2%). EU citizens were the most likely to leave EA without providing a reason (71%) when compared to Irish (59%) and non-EU (52%) citizens. Younger adults with non-EU citizenship were more likely than Irish (3%) or EU (2%) citizens to depart EA to a social housing tenancy, this is the only age cohort where Irish citizens

have a lower percentage leaving to this accommodation type than non-EU citizens. Non-EU citizens were not recorded as departing to either long term accommodation (0%) or private tenancies paid for through their own means (0%). The reliance on social housing and HAP tenancies by non-EU citizens to depart EA implies that they have access to the Irish welfare system which may indicate that they are either refugees or asylum seekers who have leave to remain in Ireland.

As shown in Table 7.7, younger women are more likely to have had an AHN completed (68%) by the time they left EA than men (64%). Irish citizens (73%) and non- EU citizens (71%) were far more likely to have had an AHN completed than EU citizens (40%). This may be an indication of EU citizens ineligibility for social housing in some cases. This particular issue is beyond the scope of this thesis to explore further but may be addressed in future qualitative research. Younger women were slightly more likely to receive support after leaving EA (7%) then men are (6%). EU citizens were slightly less likely to receive support (5%) than Irish (7%) or non-EU (6%) citizens. Given that the majority of support provided is done so for those in HAP tenancies or social housing, the slightly lower rate of support provided to younger adults from other EU countries is unsurprising though may require further examination in the future.

Non-EU citizens were more likely to have remained in EA at the end of the data collation period (29%) than either Irish (27%) or EU (27%) citizens. This was however one of the two Chi-Squared tests to return a significant p value and the Cramer's V test showed a moderate strength in the relationship between citizenship and remaining in EA at the end of the data collation period among younger adults.

Table 7.7 Younger Adults, Demographic Variables, Consistency and Support[1]

	Female	Male	Irish	EU	Non-EU	Total	Notes
AHN	68%	64%	73%	40%	71%	65%	
Support After EA	7%	6%	7%	5%	6%	6%	
Still Using EA	27%	27%	27%	27%	29%	27%	X2=20.673; p=<0.001; Creamer's V= 0.218[2]

Note: 1. Source: PASS Data Compiled by Author; 2. Chi-Squared and Cramer's V tests apply to crosstabulation between younger adults, citizenship and the EA use status 'Still in EA'.

The individuals in the younger adult group were also more likely to experience contributory events (74%) than their older peers. They are most likely to experience

homeless (18%), life (22%) and institutional (10%) events. Notably 82% of the young people who remained in EA at the end of the data collation period had experienced at least one contributory event prior to or during their stay in EA, as compared to 72% of those who departed. Of those who had not experienced any contributory events, 81% had ceased using EA at the end of the data collation period.

As mentioned in previous chapters, life events have not been significant in the models discussed so far. The exception to this is departure reasons for younger adults who had experienced life events (which includes moving country/region, having children and being in a couple) where the relationship is moderately significant ($p=<0.001$, Cramer's V = 0.201). More of the people in the younger adult cohort who had experienced a life event had ceased using EA than remained. When examining departure reasons for those who had ceased using EA, they were also more likely to have exited to a HAP tenancy (24%), than younger adults who had not experienced a life event (14%).In addition to departures to accommodation, younger adults who experienced a life event were the most likely to have become parents or been reunited with children under the age of 18 (6%) than any other group in the research population. This is relevant because these adults may not have exited homelessness but rather have moved from 'single adult homelessness' to 'family homelessness'. The movement between types of homelessness has yet to be examined in the Irish context; the results presented in this thesis demonstrate that this may be a relevant area for future research.

Middle-Aged Adults

Those in the middle-aged group were the most likely to have still been using EA at the end of the data collation period for this research (36%). As with the other age cohorts, most of those who ceased using EA did so without providing a reason for their departure (58%). Where it is known, the accommodation most commonly acquired by this group was HAP tenancies (18%) or social housing (6%). Those in middle-age were the most likely of the three age cohorts to move to a private tenancy paid for through their own means (4%). Those in the short stay group were the least likely to receive support after leaving EA (1%) across the three age cohorts under examination here.

Across all three age cohorts, women were less likely than men to depart EA without providing a reason. As shown in Table 7.8, among middle-aged adults, 49% of women and 60% of men had no departure reason recorded on PASS. Like younger adults, middle-aged EU citizens were more likely to depart EA without providing a reason on PASS (71%) than Irish (54%) or non-EU (51%) citizens. Among middle-aged adults, women were far more likely to exit to a social housing tenancy (9%) than men (5%). They were also more likely to return to family or friends (7%) than their male peers (3%). Irish citizens were also more likely to have returned to family or friends (7%) than EU (3%) and non-EU (4%) citizens. Non-EU citizens were more likely to exit EA to a HAP tenancy (31%) than Irish (19%) or EU (11%) citizens. Middle-aged Irish citizens were more likely to enter a social housing tenancy (7%) than EU (3%) or non-EU (4%) citizens. Men in this cohort were more likely to have entered long term accommodation (2%) than women (1%). Non-EU citizens were less likely to enter long term accommodation (1%) than Irish (2%) or EU (2%) citizens.

Table 7.8 Middle-Aged Adults, Demographic Variables and Departure Reason[1]

	Female	Male	Irish	EU	Non-EU	Total
NDR	49%	60%	54%	71%	51%	58%
HAP	20%	18%	19%	11%	31%	18%
Social Housing	9%	5%	7%	3%	4%	6%
Family/Friends	7%	3%	5%	1%	2%	4%
LTA	1%	2%	2%	2%	1%	2%
PRA	4%	4%	5%	1%	2%	4%
Other	6%	5%	5%	7%	5%	6%
Other Region	2%	3%	3%	3%	3%	3%
Had/Reunited Children	1%	0%	0%	0%	1%	0%

Note: 1. Source: PASS Data Compiled by Author

Middle-aged adults were the only age cohort among whom men and women had the same rate of AHN completion (66%). As shown in Table 7.9, Irish citizens were more likely to have had an AHN completed (72%) than EU (52%) or non-EU (64%) citizens. Support after leaving EA was the same for men and women (6%) although less for EU (4%) and non-EU (4%) citizens compared to Irish (6%) citizens.

Middle-aged adults are the only age cohort among who non-EU citizens were the least likely to have remained in EA at the end on the data collation period (32%) compared to Irish (37%) and EU (38%) citizens. The relationship between citizenship and

remaining in EA among middle-aged adults was one of two times a significant relationship was found among the tests on additional demographic variables. A moderately strong relationship (Cramer's V = 0.227) was found between these variables.

Table 7.9 Middle-Aged Adults, Demographic Variable, Consistency and Support[1]

	Female	Male	Irish	EU	Non-EU	Total	Notes
AHN	66%	66%	73%	52%	64%	66%	
Support After EA	6%	6%	6%	4%	4%	6%	
Still Using EA	34%	36%	37%	38%	32%	36%	X2=29.724; p=<0.001; Creamer's V= 0.227[2]

Note: 1. Source: PASS Data Compiled by Author; 2. Chi-Squared and Cramer's V tests apply to crosstabulation between younger adults, citizenship and the EA use status 'Still in EA'.

71% of the middle-aged experienced contributory events – which is close to the average for the research population. The contributory events middle-aged adults were most likely to experience were life events (24%), homeless events (16%) or both combined (13%). Those in middle-age were the most likely to experience a health event (4%) or the combination of health and homeless events (7%) compared to the other cohorts. Of those who experienced a contributory event, 75% remained in EA compared to 69% who had departed the service at the end of the data collation stage.

Thus, the middle-aged cohort are of particular concern because they appear to have the most difficulty leaving EA and the least amount of support when they do. This is also the only group for whom no specific policy responses or targeted support measures, or recognitions are in place.

Older Adults

Like younger adults, 73% of those in the older adult cohort had ceased using EA by the end of the data collation period. Older adults were the least likely to leave EA without providing a reason (41%). They were the most likely to move to a social housing unit (30%). They are also the group most likely to have had an Assessment of Housing Need completed (70%). The individuals in this cohort were the most likely to receive supports after leaving EA (18%). This rate of support is significantly higher than among the younger cohorts - just 6% of whom received support overall.

Older adults are the only age cohort in the research population in which men and women had the same percentage of departures from EA to HAP funded accommodation (11%). As shown in Table 7.10 departures to social housing are more common for women (43%) than men (26%), this was also found among the younger age cohorts, though with lower percentages than among older adults. Older Irish citizens were more likely to enter a social housing tenancy (33% when departing EA than EU (24% or non-EU (27%) citizens. Older adults are the only age cohort among whom Irish people were less likely to enter a HAP tenancy (8%) than EU citizens (18%), although this may be because they have better access to social housing than either their younger or non-Irish peers. While not common among any age cohort, entering a self-funded private tenancy, this accommodation is very unusual among older adults, non-EU citizens (6%) are the only sub-category where more than 2% departed EA this way.

Table 7.10 Older Adults, Demographic Variables and Departure Reason[1]

	Female	Male	Irish	EU	Non-EU	Total
NDR	36%	43%	39%	44%	42%	41%
HAP	11%	11%	8%	18%	18%	11%
Social Housing	43%	26%	33%	24%	27%	30%
Family/Friends	3%	3%	2%	3%	3%	3%
LTA	1%	5%	5%	2%	0%	4%
PRA	0%	2%	2%	0%	6%	2%
Other	6%	7%	8%	8%	0%	7%
Other Region	0%	2%	2%	2%	3%	2%
Had/Reunited Children	0%	0%	0%	0%	0%	0%

Note: 1. Source: PASS Data Compiled by Author

As found among younger adults, older women are more likely to have an AHN completed on their behalf (72%) than older men (69%). Like both younger and middle-aged adults older EU citizens are less likely to have an AHN completed (62%) than Irish (74%) and non-EU (72%) citizens. Older women are more likely to receive support after leaving EA (23%) than men (17%) and the difference in support received is larger than among younger (7%; 6%) and middle-aged adults (6%; 6%). Older EU citizens, like their younger peers were less likely to receive support after leaving EA (18%) than Irish (19%) or non-EU (19%) citizens. This is the only age cohort where women were more likely to have remained in EA at the end of the data collation period

(29%) than men (27%). Unlike their younger peers, the relationship between remaining in EA and citizenship has not been reported as the expected cell count less than 5 was 50% meaning that the numbers for this age group were too small to reliably perform this test.

Table 7.11 Older Adults, Demographic Variables, Consistency and Support[1]

	Female	Male	Irish	EU	Non-EU	Total
AHN	72%	69%	74%	62%	72%	70%
Support After EA	23%	17%	19%	18%	19%	18%
Still Using EA	29%	27%	27%	27%	30%	27%

Note: 1. Source: PASS Data Compiled by Author

Older adults who had ceased using EA were the least likely to have experienced contributory events (59%). Those who remained using EA at the end of the data collation period were also less likely than the other age cohorts to have experienced contributory events (62%). Like their middle-aged peers, older adults were most likely to experience life events (24%), homeless events (15%) or both (10%).

The older adult cohort is an interesting one in terms the research population under examination because they are the smallest cohort of the three considered. This raises the question of why older adults are less represented in the homeless population under examination while those aged under 55 are more so. A few notable issues arise, the first, and probably most significant, is housing instability. Between 2006 and 2016, within the general population, 87% of older adults lived in a home they owned outright or with a mortgage (CSO various years). In addition, in 2016, 8% of social housing was specifically allocated for older people (Noac, 2016). This is reflected in the data presented here through the comparatively low number of people leaving EA without providing a departure reason (41%) and the high percentage who move to state subsidised housing (41%).

Additionally, within the general population, those aged over 65 had the lowest risk of living in consistent poverty (4.46%) after social security transfers during the period under examination in this thesis. Prior to social security transfers they had the highest risk of poverty (66.6%). Comparatively, the younger adult cohort has a 36.08% risk of poverty rate and a 7.06% poverty rate after social transfers (CSO, various years). Of the middle-aged adult cohort, 30.72% are at risk of poverty before social transfers and 6.74 experience poverty after transfers have occurred (CSO various years). These

different rates are likely, in part, due to those over the age of retirement (66) having access to the state pension, which is available to habitual residents over the age of 66 (Citizens Information, 2021b).

Discussion

The primary challenge in reaching functional zero homelessness in the Irish context is access to appropriate housing. This chapter has shown that the type of housing to which homeless people move on departing EA changes over the life course. Younger adults were the most likely to leave EA without providing a reason (61%) or moved to another region (4%). Middle-aged adults were the most likely to have moved to a private tenancy without financial supports (4%) but were also the most likely to have been in EA (36%) at the end of the data collation period. Older adults where the most likely to have moved to social housing (30%). Across all age groups, housing paid for or supplied by the state has the highest success in terms of transitions out of homelessness (24%). The high rate of unknown reasons for departing EA is a consideration here as there may be a stronger relationship with a particular accommodation type which this thesis is unable to demonstrate.

However, supports will also be necessary for some formerly homeless people to successfully maintain housing stability. It is likely that, if who only require a housing solution leave homelessness quickly, an increasing proportion of people who remain using EA will need additional supports. This has already been found in the Danish context where housing instability without additional issues is less common than in the Irish context (Allen *et al.*, 2020).

As the tables above show, trends in departures from emergency accommodation are shaped by a complex combination of personal factors (specifically contributory events experienced) and structural factors (principally access to long-term accommodation) which vary over the life course. The relationship between contributory events and departures, as has been explored here, is not particularly strong. However, the differences between the groups are striking. Those who experienced multiple contributory events account for 28% of the research population. Of those who remained in EA at the end of the data collation period, 35% had experienced multiple contributory events. The reverse is true for those who did not experience contributory

events. The latter group made up 28% of the research population, but accounted for 23% of those who remained in EA.

Among those who experienced one event there is very little difference in terms of the number of people who have left EA and those who remain. Identifying the reasons for this are beyond the scope of this project but may be worthy of further investigation through future research. However, the difference in the number of experiences which the people who remained in EA had compared to those who had left EA, suggests that when multiple events are experienced, leaving EA is more challenging. The clearest indication of this is that, of those who had experienced a combination of homeless, health and life events, 52% remained in EA at the end of the data collation period.

Conclusion

This chapter has examined transitions out of homelessness. It has shown that successful housing exits, receiving support after leaving EA and experiences of contributory events change over the life course. This research has identified three primary differences between the EA using age cohorts. The first is the rate of exit. Those who remained in EA after the data collation phase was complete were predominantly aged between 35-54 - the middle-aged adult group. The analysis presented here suggests that the lower departure rate is strongly correlated with the second difference between age cohorts, which is the accommodation type people moved to. The statistically significant relationship between age and access to social housing among EA reflects other information on the social housing sector (see: Noac 2016). Local authority provided social housing is more likely to be occupied by families and older people than to singe adults between the ages of 18 and 54. When combined with other housing support payments from government (primarily HAP), 15% of the younger adult and middle-aged adult cohorts used government support to exit EA. In comparison 30% of the older adult cohort exited with the help of government housing supports, primarily social housing. Social housing is the most viable type of housing for people leaving homelessness (Allen et al., 2020). The lack of accessibility for most single adults appears to be acting as a significant barrier to them leaving EA and entering permanent, stable accommodation.

The high level of departures from EA where formerly homeless people did not report their new accommodation type, demonstrates that people are finding alternatives to

EA on their own without support from homeless service providers. What is clear from the data is that some people have very low support needs in terms of finding alternatives to EA, as evidenced by the rate at which they successfully do so. What it unknown is if they have actually found alternative accommodation or if they have entered another form of homelessness, including moving to another country or part of Ireland but remaining homeless. It is likely that better access to affordable housing would benefit at least some of the individuals who have not provided information on their new accommodation though it is currently impossible know what percentage this would apply to.

The third significant factor that influences rates of exit from homelessness and which varies over the life course is the experience of contributory events, those in the younger adult cohort being the most likely to have a reported experience at least one event on PASS. It is impossible to say, using these data, if this is because they experience these events more often or if they were asked more often by service providers or if they were more forthcoming with the information regarding these experiences. Qualitative research on this topic in the future may be able to clarify this. What is clear is that these experiences are common and awareness of them is essential to providing appropriate support to those who use EA. The fluctuation over the life course, as well as between event type, supports the need for individualised supports, as has been found in the international context (see: Parsell 2018). It is also clear that in all three age cohorts, those who did not experience contributory events were more likely to have ceased using EA.

As has been shown here there is no single type of transition out of homeliness at any stage of the life course. Transitions, contributory events and level of support need are all individual experiences. Just as there is no single transition out of homelessness, there is no single solution. Policy makers should therefore focus on highly flexible and individualised, resource rich services. These would support people in choosing the best strategy for them to transition out of EA and into their future home.

Chapter Eight   Conclusion

Introduction

In the introduction chapter of this thesis, seven objectives were outlined in order to guide the focus of this thesis. Each of these objectives have been addressed in the chapters following the introduction and the extent to which they have been met will be discussed here in the conclusions to this thesis. As discussed in Chapter Three, the enumeration of EA use by single adults in the Dublin region between 2016 and 2018, was completed during the first stage of the data collation process through the creation of the dataset utilised in this thesis. During this process demographic information, specifically age, gender and citizenship were identified and recorded for each of the individuals within the research population. In Chapter Four, Culhane, Kuhn and colleagues' typologies of transitional, episodic and chronic homelessness were found to no longer be the 'best fit' for understanding single adults EA service use in the context of the PASS data and the Dublin region. An alternative four-part typology of EA service use was found through cluster analysis. This four-part typology enables a richer understanding of single adults EA service use in the context of the PASS data and the Dublin region

In order to explore how the concept of transitions over the life course, each transition stage (into, through and out of EA) was examined in relation to the age cohorts established in Chapter Three. Patterns of entries into EA were discussed in Chapter Five, specifically in relation to reasons for homelessness and previous accommodation types. Transitions through EA were explored in Chapter Five where the four-part typology of EA service use was examined within the context of the transitions framework. Chapter Seven examined transitions out of EA, specifically in terms of current accommodation status and support received. The demographic characteristics were also assessed in Chapters Five Six and Seven as to whether these are associated with different patterns of EA usage. The extent to which relevant personal histories of this population have been recorded in PASS was also explored in these chapters to establish whether these are associated with different patterns of EA usage. As discussed in Chapter Three these personal histories were coded as the four contributory events, life, institutional, health and homeless events in order to be used

in the analysis presented in this thesis. As highlighted in Chapter Three, the extent to which contributory events could be explored in this thesis was limited due to the information available. Contributory events were examined in relation to the age cohorts and transition stage as discussed in Chapters Five, Six and Seven.

This final chapter of the thesis sets out the conclusion to the analysis presented in previous chapters. It is organised into four further sections. First, the main findings from the analysis of the PASS data presented in this research are discussed and related to the seven objectives of the thesis. Second, the contribution to knowledge which the thesis makes in terms of theory and empirical research on homelessness is outlined. This section also considers the extent to which the thesis has achieved its first central aim of contributing to reducing the disconnect between the quantitative and qualitative literature on homelessness will be assessed. The potential avenues for future research identified in the empirical chapters will also be examined. The third section of these conclusions considers how the findings of this thesis can fulfil the second central aim of this thesis in being practically applied to the inform the better design of policies and services. The final section encompasses personal reflection by the author on the experience of completing this doctoral thesis.

Findings

Data and Research Population

The data examined in this thesis was collated by the author from the PASS database managed by the Dublin Region Homeless Executive to enumerate EA use by single adults in the Dublin region between 2016 and 2018. This process took longer than was initially anticipated because the full quantity of data logged on PASS, specifically through case notes, had never been fully explored prior to this research. The inclusion of information from these case notes in the dataset collated for this thesis resulted in a richer analysis. The resulting dataset was better equipped to explore the complexity of homeless transitions than could have been achieved by simply generating frequency tables based on the pre-set variables stored in the PASS database. The inclusion of self-reported information, such as homeless people's own explanation of their reason for homelessness and previous accommodation enabled the exploration

of how the research population communicated these aspects of their experience of homelessness.

As mentioned in the introduction to this thesis, its first objective was to enumerate EA use by single adults in the Dublin region between 2016 and 2018. The initial analysis of the PASS database conducted for this thesis found 10,283 unique individuals who first used EA between January 2016 and December 2018. From this initial list, 6,614 people were excluded based on findings which identified them as not fitting into the definition of a single adult (an adult or member of a couple who are in EA without children) who first used EA in the Dublin region between January 2016 and December 2021.

Identifying the demographic characteristics of this EA users in Dublin was also a key objective of this research and this was achieved by means of descriptive analysis of the demographic characteristics of the research population. This analysis revealed that 80% of EA users were male, 52% were aged between 26-45 and 56% were 'white Irish'.

Age was identified by Pearson's Two Tailed test as being the demographic variable with the most significant relationships with the variables identified for analysis for homeless transitions (reasons for homelessness; previous accommodation; consistency clusters; contributory events; accommodation status; support after EA; AHN completion). On the basis of these findings and taking account of Beer and colleagues' (2011) work on housing transitions across the life course, age groups were defined and the research population was organised into these groups, younger adults, middle-aged adults and older adults.

Homeless Transitions Across the Life Course

Helping to reduce the disconnect between the quantitative and qualitative literature on homelessness is the central aim of this thesis and to achieve ideas from the literature on housing and homeless transitions were drawn on and adapted to construct a original analytical framework which guided the analysis of EA usage data in Dublin presented in this thesis.

The new conceptualisation of homeless transitions presented in this thesis draws on two important contributions to the housing and homelessness literature. The first was the concept of housing need changing over the life course presented by Beer and

colleagues (2011). Feijten & Mulder (2005) show that as we move through our adult lives our circumstances change and with them our housing needs. The drivers of these changing needs have been examined frequently in the academic literature on housing, through which a number of different lenses (Beer *et al.*, 2011). The most frequently cited of these being housing careers (Kendig, 1984), housing histories (Forrest, 1987) and housing pathways (Clapham, 2005). The advantage of the Beer et al's (2011). housing transitions approach over these other approaches is that it identifies the triggers and consequences of events which occur over the life course. Examples include, becoming an adult and moving out of the family home, moving to new accommodation when planning to have/having children, or moving accommodation after a divorce. These periods of transition are easier to identify and investigate than attempts to examine the life course as a whole, as is done in housing careers, histories and pathways. A further strength of the transitions approach is its flexibility, which enables it to be adapted to analyse homelessness as well as housing. In their framework, Beer and colleagues consider the following five dimensions: stage in the life course, economic resources, health and well-being, tenure, and lifestyle values and aspirations (Beer *et al.* 2011, p. 31) and how they relate to housing transitions over the life course.

The second set of ideas utilised in this thesis come from McNaughton's (2008) work on homeless transitions. McNaughton (2008) theorises that homelessness is likely to occur when the social, human and economic capital resources required to support a housing transition have been exhausted or cannot be relied upon. There can be no definitive list to specify what transitions a person needs to feel safe, secure and in control of their own lives; however the ability to determine one's own narrative and make decisions is paramount in recovering from homelessness (McCulloch, 2015; McNaughton, 2008). McNaughton identified three key components of homeless transitions; relationships and social networks; level of resources; and experiences of edgework (McNaughton, 2008, p.63). In her work, McNaughton defines edgework as 'actions and events that involve negotiating at the edge of normative behaviour' (McNaughton, 2008, p. VII). This concept of edgework is intertwined with personal capital in McNaughton's (2008) book. Her theory centres around the idea that homelessness occurs most frequently when the social, human and economic capital resources required to support a housing transition are either unavailable or unreliable.

Limitations in the PASS dataset examined in this thesis, particularly in terms of the number and definition of variables included, meant that not all aspects of McNaughton's (2008) and Beer et al's (2011) analytical frameworks could be explored in this thesis. Instead, aspects of both were combined to construct a new analytical framework focused on homeless transitions which could be operationalised using the PASS dataset. The analysis presented here focused on three categories of homeless transitions: transition into homelessness, transitions through homeless and transitions out of homeless. Specific variables were identified as being intrinsic to each of these homeless transitions. The transitions into homelessness variables examined were reasons for homelessness; previous accommodation; and pre-EA contributory events. The transitions through homelessness variables identified were: consistency clusters (identified in Chapter Four); breaks in EA service use; and experiences of contributory events. Variables linked to transitions out of homelessness were: departure reason; EA status; and contributory events. Each of the variables intrinsic to each homeless transitions were significant in terms of age.

The dominant theme which linked transitions into, through and out of homelessness was housing need. Most people transitioned into homelessness from either a family home or a private rental tenancy. As discussed in Chapter One, access to affordable housing is currently a challenge in the Irish market (Grotti et al., 2018) There is also a lot of competition for housing because current supply does not meet demand (McGinnity et al., 2021). This is reflected in the fact that 42% of the research population had previously lived in some form of independent accommodation, while another 46% of the research population had been living with family or friends prior to entering EA. Many members of the research population became homeless after being asked to leave their accommodation (13%) and/or faced housing affordability issues (16%) or were unable to continue living with family or friends (26%). The pattern of EA use demonstrated that most of the research population used EA for more than six months (54%) and many did so inconsistently (37%). Thus, the analysis presented in this thesis indicates that in the Irish context the majority of people who experience homelessness only need housing in order to transition out of homelessness. However, few members of the research population managed to secure housing. Only 19% exited to a new tenancy (in social housing, HAP subsidised private rental or non-subsidised private rental). This may indicate that the lack of availability of housing is preventing

people who could transition out of homelessness from doing so.

Each of the homelessness transitions discussed in this thesis has strong physical and emotional dimensions. In becoming homeless people may feel scared, infantilised, trapped, stressed, alone or helpless (Gerstel et al., 1996; Goodman et al., 1991; McNaughton, 2008; Parsell, 2018). In being homeless, a person may sleep rough or in emergency accommodation, or other temporary unstable accommodation types (FEANTSA, 2005). In resettling into a new home when transitioning out of homelessness people may feel more confident, secure and belonging to the wider community (Farrugia, 2016; Marr, 2012).

The dimensions identified by Beer and colleagues have been considered in this thesis through the analysis of the age cohorts and contributory events. '[S]tage in the life course: (age, household structure, fertility)' (Beer *et al.* 2011, p. 31) was applied in the age cohorts and in life events (having children (6%) and being in a couple (10%)). '[E]conomic resources (position within the labour market, wealth, access to government assistance)' (Beer *et al.* 2011, p. 31) were more difficult to examine within the research population. There are indications within the research population of limited financial resources as 8% reported losing their accommodation due to income/affordability issues. '[H]ealth and well-being (presence or absence of a disability within the household)' (Beer *et al.* 2011, p. 31) was primarily interpreted through contributory health events. These events included reported disability, mental health and/or addiction issues and stays in hospital or treatment facility. '[T]enure (history of prior occupancy in one or more tenures)' (Beer *et al.* 2011, p. 31) was challenging to establish as the length of previous tenancies or the number of tenancies held was not included on PASS. Finally, 'lifestyle values and aspirations (cultural norms, consumption preferences, relative significance attached to housing)' (Beer *et al.* 2011, p. 31) were found to be beyond the scope of this thesis and may be more appropriately researched using qualitative methods. Based on the relevance of four out of five of the dimensions identified by Beer and colleagues' (2011) framework of transitions across the life course, it was found to be appropriate for this data. Applying the adapted framework in this thesis revealed new insights into EA use and homelessness in the Dublin region.

Relevant personal histories (McNaughton, 2008) of the research population were organised into the four types of contributory events: life events, health events, homeless events and institutional events. Homeless events were the most common contributory events experienced by the research population (43%). These were closely followed by life events (42%) and then health events (13%). Institutional events were the least commonly reported (6%) but those who experience these types of events also have access to additional support. The small number of people who reported these experiences may be an indication that the additional supports offered are successfully preventing people becoming homeless after leaving care, prison or direct provision. Overall, younger adults were more likely to have experienced contributory events (74%).

In order to explore how the concept of transitions may be applied to the results of these analyses, the three transitional stages, into, through and out of EA, were examined separately and the results of this analysis are presented in Chapters Five, Six and Seven. Each transitions analysis examined the three age groups; younger adults (18-34); middle-aged adults (35-54); and older adults (55+). Age cohort was found to play an important role at each transition stage. In transitions into homelessness (Chapter Five) age was relevant in terms of accommodation lost prior to entering EA, reasons for becoming homeless and contributory events experienced prior to entering EA. When transitioning through homelessness (Chapter Six) consistency of service use and contributory events experienced varied over the life course. EA departures (Chapter Seven) also varied according to age cohort as did supports received after leaving EA.

Younger adults primarily transitioned into homelessness from living with family (32%) and 34% of this group came from accommodation which was subsidised by the state (HAP, rent supplement or public housing). The primary reason for younger adults transitioning into homelessness was family circumstances or the breakdown of a family relationship (26%). Middle-aged adults reported entering EA due to having no income source (8%), family circumstances (12%) and being asked to leave accommodation (13%). The main type of previous accommodation for middle-aged adults was private rented accommodation (25%). Middle-aged adults were less likely to come from subsidised housing (i.e. receiving rent subsidy payments from the state or living in social housing) (25%) than younger adults. Older adults were the most likely

in the research population to have entered EA from private rented accommodation (34%). While some older adults entered EA from subsidised housing, overall, they were the least likely to have received state support in their previous accommodation (19%). While older adults are the smallest age group of the three included in this research, they made up 17% of all those who entered from private rental accommodation. They also have the highest percentage of having previously been homeowners (3%). Older adults were most likely to enter EA based on a reason associated with their previous accommodation (asked to leave their accommodation (18%), notice of termination (8%) or notice to quit (6%)).

When transitioning through homelessness, younger adults were the most likely to experience a short stay in EA (24%). Younger adults were also the most likely to have had a break in service use during their EA use period (12%) than either of the older age groups. They were also found to experience rough sleeping (26%) more than the older age groups. Younger adults tended to use EA inconsistently, 39% were found to be long stay inconsistent users of EA. Middle-aged adults were the most likely to experience long stay EA use (56%) in the research population. Of the research population who were in EA for more than 6 months 57% were aged 35 or older. Older adults were the most likely to have stable EA service use across all three age groups. 70% of this age cohort used EA stably for >50% of their EA use period; in comparison to 53% of the middle-aged adults and 47% of the younger adults. This cohort also had the lowest frequency of breaks in use during their time in EA.

At the end of the data collation period, 73% of those in the younger and older adult cohorts had ceased using EA. Younger adults were the most likely to have left EA without informing their service provider of their intended accommodation. The most common transition out of homelessness by the younger adult cohort was into housing provided or subsidised by the state (social housing/HAP, 21%). Those in the middle-aged group were the most likely to have still been using EA at the end of the data collation period for this research (36%). As with the other age cohorts, most of those who had departed EA did not provide a reason (58%). Where it is known, the most common transition out of homelessness for middle-aged adults was into either a HAP tenancy (18%) or social housing (6%). Older adults were the least likely to leave EA without providing a reason (41%). Of the three age cohorts, older adults were the most likely to transition out of homelessness into social housing (30%). They were also the

most likely to receive supports after leaving EA (18%) in comparison to the younger cohorts - just 6% of whom received support overall.

The application of McNaughton's (2008) framework to this thesis revealed that many of its elements were present among the research population. Transitions into homelessness occurred most frequently when relationship and social networks had broken down and could no longer be relied upon (26%). The second most frequent trigger of transitions into homelessness related to losing accommodation (16%). Experiences of edgework have been identified as experiencing addiction, specific forms of homelessness (involuntary sofa surfing, rough sleeping, living in a squat) and/or engaging in criminal activity (had been to prison). Within the research population, 17% of people were identified as experiencing edgework.

Consistency of Emergency Accommodation Usage

Exploring the relevance of Culhane, Kuhn and colleagues' very influential typologies of transitional, episodic and chronic homelessness to the case of single EA users in the Dublin region was also an objective of the thesis. This was addressed in hane Chapter Four of this thesis.

The cluster analysis of the research dataset discovered that this typology was not the best fit for understanding the EA usage patterns of the research population and a four-part typology was a better fit for this population, becauses considerably more people used EA for longer periods than has been previously assumed. The main issue identified in relation to Culhane and Kuhn's (1998) typologies has been that in applying it to the single adult EA using population in Dublin, the true length of time spent in EA is masked. Additionally, the application of 'episodes' (30-day breaks in service) is problematic because it disguises the inconsistent EA use of many people in the research population. Inconsistent EA usage is important to note because although those who use EA inconsistently may not take long breaks from service usage, they are more likely to experience other forms of homelessness, particularly sleeping rough. People who used EA inconsistently had the highest rate of experiencing contributory events (84%). They are more likely to experience long-term homelessness, as is evidenced by the fact that, of the research population who remained in EA at the end of the data collation period, 56% were in the long stay inconsistent group. Those from the long stay inconsistent group who left EA are less

likely to receive support (11%) than the medium stay group (14%) or the long stay stable group (28%). The only group less likely to receive support after leaving EA was the short-stay group (2%).

Contribution to Knowledge and Implications for Literature

Chapter Two of this thesis examined the most influential analyses of homelessness from qualitative and quantitative research literature, explored their strengths and weaknesses and assessed their relevance to the Irish context. This thesis has sought to contribute to this literature, build on its strengths and make a contribution to addressing its weaknesses.

The primary theoretical contribution this thesis makes to the field of homelessness research is that it builds on and adapts Beer *et al* (2011) and McNaughton (2008) is a ideas to devise a new framework for analysing homeless transitions through the life course. This framework makes a useful contribution to the homelessness literature because it identifies the factors which increase the risk of homelessness and how they impacted the research population. Factors which indicate risk of homelessness include: breakdown of personal relationships; being unable to find/afford new accommodation when previous accommodation is lost; previous experiences of homelessness; and contributory events. Factors which prolong the experience of homelessness include: the lack of suitable long-term accommodation; inconsistent service use; engagement in rough sleeping and other contributory events. Exit transition factors include access to suitable accommodation; specifically, housing provided or funded by the state; and contributory events.

This framework was designed to be adaptable; it can be applied to different populations sizes and elements of the framework could be omitted depending on the available data. In cases where data containing information on insecure housing or prevention measures is available, an additional transition (into insecure housing) may be added. The framework can be broken down into two parts: the relationship between age and the transition specific variables (e.g. previous accommodation/consistency clusters/departure reasons); and the relationship between age and experiences of contributory events.

This thesis also found that the factors which shape transitions into, through and out of homelessness change over the life course, an idea which could be applied to other jurisdictions and vulnerable populations in both quantitative and qualitative research. Previous research has found links between additional experiences and homelessness, particularly homeless histories (Anderson, 2001; Fitzpatrick et al., 2013; Johnson et al., 2015; Mayock & Corr, 2013; McMordie, 2018). This thesis adds to this well-established knowledge base and supports the idea that in order to break the cycle of homelessness, some people will need additional support such as the American Housing First model (Greenwood et al., 2005; Manning et al., 2018) or the Finnish Housing First model adapted to the Irish context.

This thesis contributed to the literature on typologies of emergency accommodation use by homeless people. The results of the analysis conducted on EA exits support previous findings that EA stability is an important component (Culhane, Metraux, & Byrne, 2011; Pleace, 2012; FENATSA Youth Network, 2017) when considering transitions out of homelessness. Those who used EA long-term and inconsistently were both the largest group in the research population and the group that was most likely to have remained in EA at the end of the data collection period. This finding is significantly different from studies where Culhane and Kuhn's methodology has been applied in which the transitional groups have been the largest (Aubry et al., 2013; Benjaminsen & Andrade, 2015; Waldron et al., 2019). This may reflect the fact that in this thesis Culhane and Kuhn's focus on breaks in service use was omitted from the analysis and consistency of service use was examined instead. This approach may be utilised by other researchers whose focus is on policy making or service provision in order to gain a different perspective on their EA/shelter/hostel using population than Culhane and Kuhn's method can provide.

This thesis has also shown that the experience of homelessness changes over the life course. People at different ages and life stages have different reasons for becoming homeless, EA use patterns and departure reasons. They also experience different contributory events. The evidence produced in this research supports the use of age in other models, such as applications of the pathways model (Somerville, 2013). However, as shown here, younger, middle-aged and older adults each have distinct homeless transitions, implying that all these age cohorts are significant; further

exploration through new research in the international context will be able to test if these patterns emerge elsewhere.

The primary empirical contribution is the dataset collated for this thesis which provides new information on the single adult EA using population in Dublin. Prior to this thesis, no secondary analysis on data collated directly from PASS had been conducted by an external researcher. The dataset collated for this thesis demonstrates the value of this form of data collection and the importance of cooperation between researchers and state bodies in improving understanding of the experience of homelessness in the Irish context.

This thesis has also made secondary contributions to the research literature on homelessness which are worth mentioning. For instance, it confirms the findings of some previous international research and its relevance to single adult homelessness in the Dublin region. As has been identified in the review of contemporary international research presented in Chapter Two, the stereotype, that most homelessness people are older men with addiction or mental health issues who sleep rough, no longer holds true (Burt, 2016; Fitzpatrick, 2005). The analysis of single homeless people in Dublin presented here shows that they were primarily young or middle-aged men who did not report substance abuse or mental health issues and did not engage in rough sleeping. The analysis presented in this research shows that personal relationships and accommodation are far more pressing issues. The findings from previous research, which identified that family relationships and accommodation issues are significant among people experiencing homelessness (Anderson & Christian, 2003; Bramley & Fitzpatrick, 2018; Chamberlain & Johnson, 2013; McNaughton, 2008) are supported in the Irish context.

This thesis also confirms that the use of administrative data in homelessness research has significant benefits (Connelly et al., 2016; Culhane, 2016). Should linked administrative data (proposed by Culhane, 2016) become available in Ireland it would expand our understanding of EA users' engagement with the state and the services they use. This would fill the gaps in terms of employment status of EA users in particular. As has been demonstrated in this thesis, the quantity and quality of data stored on PASS is sufficient for future analysis to be completed. If additional information becomes available in the future, the analytical framework proposed could

easily be expanded to include additional variables. There are also ethical advantages to using secondary analysis of administrative data. The homeless population in Ireland is, in terms of absolute numbers, relatively small. This puts them at risk of being over-researched (Cleary et al., 2016). Administrative data allows new research to be pursued without those who experience homelessness having to contribute more information, time or energy. This is particularly relevant for populations, such as those who experience homelessness, who have seen little to no improvement in their circumstance despite previous research efforts (Cleary et al., 2016).

Homelessness Policy and Service Implications

The disconnect between academic research on homelessness and the design of policies and services is an issue which needs to be addressed for the goal of functional zero homelessness to be reached (O'Sullivan, 2020). Homelessness research has identified the key issues which need to be tackled to prevent homelessness from occurring and to help those in EA to exit. As discussed in detail in this thesis, housing and appropriate supports are the primary needs of this population (Geertsema & Edgar, 2010; Johnson et al., 2008). Based on the available evidence, changing the EA model to single occupancy units for single adults and couples will have a positive impact physically and psychologically for people who experience homelessness (McMordie, 2020; Pleace et al., 2015).

Previous policies which aimed to end homelessness in Ireland have clearly not been achieved. In order for current policy to work, housing and services must be more readily available and more evenly distributed across the age groups in EA. Currently, age specific services exist for younger and older adults, but none are available for those who are middle-aged. As identified in this thesis, middle-aged adults are more likely to experience long-term homelessness than either of the other two age cohorts, indicating the need for services which can help them address their needs.

The analysis presented in this thesis has specific implications for policy makers and service providers. Apart from increased access to housing, the three homeless transitions (into, through and out of homelessness) examined here will require different actions and inputs in order to increase sector success in terms of reducing the number of people who experience homelessness.

Homeless prevention services are well established in the Irish context (O'Sullivan, 2020). These prevention services have primarily targeted young people and families with considerable success (Focus Ireland, 2021). The findings of this thesis have shown that many people in the research population experienced relationship breakdown prior to entering EA (24%), therefore family specific homelessness prevention interventions are necessary. Relationship breakdown was a particularly significant trigger of homelessness among the younger adult cohort, implying that including young people in the target group is also appropriate.

However, loss of accommodation and having no or limited income were also significant factors for the research population implying that additional supports to improve access to appropriate accommodation and stable income are needed, particularly for the two older cohorts. These issues are not unique to Ireland and are to be found in the international context. The relationship between moving out and employment/income has been found to be significant among young adults in Ireland (Aassve et al., 2002). In more recent years, the increasingly precarious nature of work has impacted younger adults, who have become more likely to live with family or in private rented accommodation than to move into home ownership (Bobek et al., 2020). Internationally, the reasons for moving house are also diverse and include employment, housing, family and access to resources such as education for children (Hansen, 2014; Ihnke, 2014; Metcalfe, 2006; Winstanley et al., 2012). Becoming homeless due to housing difficulties has previously been identified as a risk in the English context (Fitzpatrick et al., 2000; Fitzpatrick, 2005). McNaughton (2008) also identifies the importance of access to cultural, human, social, economic and/or material resources in preventing the transition into homelessness. If people do not have sufficient access to one or more of these resources, losing accommodation can trigger a transition into homelessness.

The evidence presented here also suggests that expanded access to alternative accommodation would have been beneficial to the research population. Those who transitioned into homelessness due to relationship, socio-economic or health challenges may have been able to avoid this transition had appropriate accommodation been available. This is particularly evident among older adults who left private rented accommodation (34%) and entered EA rather than completing a

successful housing transition to other accommodation. While less frequent among the younger age cohorts, 28% of middle-aged adults and 16% of younger adults entered EA after leaving private rental accommodation. Of those who entered EA from a private rental tenancy, 81% had departed EA by the end of the data collation period, whereas 69% of the research population as a whole had ceased using EA by this time. Of those who entered EA from a private tenancy, 31% departed to a new tenancy (in private housing (primarily with the help of HAP subsidies) or in social housing). Given the low level of support received by the EA population who did leave EA (7%), this research strongly suggests that the majority of those who use EA can live independently and will only need access to housing in order to do so. It is likely therefore, that transitions into homelessness for this group could be prevented through enabling them to transition into new accommodation as opposed to EA.

Implications for Emergency Accommodation Services

There are well documented risks associated with staying in EA for prolonged periods of time, including detrimental impacts on mental health (Gerstel et al., 1996; McMordie, 2018) and institutionalisation (Khan, 2010; Stark, 1994). As has been shown in Chapter Six, most people in the research population used EA for more than six months. This indicates that the system is not being used in the way in which it was intended – i.e. for less than six months. What these data are able to demonstrate, is that there are people (the short stay group), who use EA in a way in which is appropriate for the system design. The medium stay group, while still being within the scope of short-term homelessness, includes people who will enter long-term homelessness if interventions are not implemented to trigger an exit. The long stay group is the most concerning in terms of using EA, as the system was not designed as long-term accommodation.

Given the length of time the average person spends in EA in Ireland and the complexities added through experiences of contributory events, a new approach to EA should be considered. The most practical approach internationally to this issue is the Finnish Housing First Model. The primary advantage in this model in terms of EA service provision is that it uses single occupancy rooms, on a multi-night (stable) basis with onsite supports available (Pleace et al., 2015). One advantage of using single occupancy, stable accommodation is that it will likely be viewed more positively by EA users whose stress levels have been, in part, attributed to sharing rooms with

strangers (McMordie, 2020). In making the accommodation safer for people in homelessness, rough sleeping should reduce because having a private room is likely be viewed as being more favourable than sleeping out. From a service provider perspective, having EA users in more stable accommodation will increase access and potentially engagement which can act as a launch point for establishing the individual's needs in order to move into permanent accommodation.

Potentially at issue is that people who avail of the current system for short periods of time (less than 30 days) may choose to stay longer in single occupancy accommodation than hostel accommodation. However, it could also be argued that should this happen, it would be due to people choosing a more stable option. In addition, if people stay in EA rather than trying to source alternative accommodation independently of support services, it may potentially prevent multiple experiences of homelessness by ensuring that when people exit EA they do so to permanent housing.

This approach switches the focus away from numbers and towards outcomes. The objectives of the Finnish Housing First Model include the short-term goals of accommodation stability and security combined with establishing support needs; and the long-term goal of permanent resettlement in the community (Pleace et al., 2015). This approach allows for more flexibility and choice for both the service provider and the service user. As Parsell (2018) argues, people who use homeless services can have dramatically different needs. By providing secure and stable accommodation, people who only need somewhere to stay while they re-establish themselves in housing/employment can do so whereas those who need significant, hands-on support, are able to receive it.

Long-term beds are already provided by some EA service providers in the Dublin Region and, were used by a considerable proportion of the research population (24%). These beds are assigned either on a 'rolling basis' (i.e. no defined period of time set) or for a specified period of time (one month, six months etc). Given that PASS was set up to allocate beds on a one night only basis, the fact that nearly a quarter of the research population used beds on a long-term basis, indicates that there is a demand for more security in accommodation. These beds are allocated by emergency accommodation service providers; they are not an option which can be chosen by the EA user. One important aspect in relation to these beds is that an individual will lose

access to them if they do not inform the service that they will be staying elsewhere. For example, a person may stay with family/friends over Christmas intending to return but if that person fails to report to their service the bed will be allocated to someone else. This means that of 868 people in long-term beds in the research population, all of them used EA stably once the bed was allocated. However, case notes on profiles indicate that there are waiting lists for long-term beds in operation among service providers. What was also clear from case notes is that an informal system of long-term beds also exists, where a person books the same bed every day (if possible), is also being used by both service providers and EA users. These practices suggest that should accommodation stability be introduced into the system people would use it more reliably.

By increasing stability in accommodation, homeless people may find themselves better able to address the other issues they are facing. This has been one of the most important findings of the American Housing First model (Tsemberis & Henwood, 2016). By expanding stability of accommodation, as has been done in Finland, people can engage with other services such as counselling, addiction support, employment services or education (Shinn & Khadduri, 2020).

Implications for Supported Resettlement of Homeless People

As mentioned above, very few of the research population received support when leaving EA (7%). It would therefore appear that assistance in terms of learning how to manage a household may not have been necessary. However, a previous mixed methods study which also used PASS data, coupled with interviews with EA users, found that some homeless people have positive views of the SLÍ programme. Specifically, they felt validated when their support worker recognised their capacity for independence (Parker, 2021). Current EA services often use the 'housing ready' (or staircase) approach which requires service users to demonstrate their ability to maintain a tenancy through engagement with programmes set by the service provider (Gaboardi et al., 2019); whereas the 'securely housed' approach focuses on reducing the length of time spent in EA while ensuring any new tenancy is long-term and secure with additional supports available (Parsell et al., 2014). Based on Parker's (2021) findings from the Dublin region, should the 'securely housed' approach be applied in the Irish context, supports may include services which help to increase the confidence people feel in their independence and validate their capacity to manage a tenancy.

The long stay inconsistent group of EA users identified in Chapter Four (who have similar traits to the 'chronic' group identified by Culhane, Kuhn (1998)) are likely to need more intensive support, such as Housing First, in order to exit EA permanently. 51% of those who remained in EA after the data collection phase was complete were middle-aged. The analysis presented here suggests that lower EA departure rates are strongly correlated with age and the accommodation type to which homeless people moved on exiting homelessness. This is likely due to limited housing options because social housing is more available to families and older people. HAP rent subsidy rates are too low to cover market rents in many districts of Dublin (Hearne et al., 2017). The potential service improvements which could be introduced to address this are either to increase the provision of social housing for this group (an increase of one and two bed social housing units has been included in the government's current housing policy statement - *Housing For All* (Government of Ireland, 2021a)) and/or increase HAP rates. Discretionary increases in HAP rent subsidy rates are available in the Dublin region (hap.ie, 2021), however the frequency of and amount by which they are applied is unknown.

I*n the Housing First National Implementation* Plan, 20% of the research population were identified as having a need of support for mental health or addiction (Government of Ireland, 2018). In the PASS data presented here, 10% of adults in EA were shown to need support for mental health or substance misuse, indicating that these issues are under-reported on PASS. Given that the data for the *Housing First National Implementation Plan* were gathered directly from service providers, this appears to be an issue of under-reporting by staff rather than by people using EA. Consequently, it is reasonable to assume that between 10-20% of the research population would have benefited from Housing First had it been available to them during their EA use.

Of those who had departed EA by the end of the data collection phase, 57% did so without providing a reason. This indicates that many people can and will find alternatives to EA on their own without support from service providers. However, the concern with this group is that they may be entering another form of homelessness (such as sofa-surfing) or living in unsuitable accommodation (such as an overcrowded dwelling). These 'solutions' are unlikely to be sustainable and may put people at risk of re-entering EA. Of those recorded as taking a break during their EA use period, 30% did so without providing a clear reason and returned to EA within the data

collection period. This indicates that at least some of these independent departures were unsuccessful and resulted in a return to EA. If support service providers were able to better facilitate access to new, stable accommodation it is likely that the proportion of unknown departure reasons would decrease. A secondary benefit would be that service providers and policy makers would be able to more reliably measure successful departures from EA which would better inform policy and service design.

Personal Reflections on Research Experience

I chose to research homelessness in Dublin due to two formative experiences in my life. The first is being a Dubliner, I have lived in or close to the city centre most of my life and the city is part of my identity. Dubliners know that Dublin is more like a big village than a metropolitan city; and because of this I have always known and been friends with people who lived (or are living) through homelessness, housing insecurity, addiction and serious mental health challenges. To a certain extent the Dublin which I grew up in normalised these issues for me and it took going to university for me to fully understand their extent and pervasiveness.

The second formative experience for me was working in Lifeline needle exchange in Manchester in 2011, where I primarily worked with homeless heroin users and sex workers. Lifeline had a service user support system, not unlike PASS, which was my first introduction to the idea of data collection for vulnerable populations. The benefits of this system for harm reduction were fundamental to the care provided by Lifeline. For example, knowing that a client had visited the service more frequently than usual or had taken a significant break between visits allowed alert support workers to identify and challenge injection practices which could be life threatening. However, working in Lifeline also showed me the negative side of data collection from a service user perspective. The primary challenge is that there is no guarantee that the service user can read, so having multiple forms or documents is not only pointless, it can discourage people from accessing the services they need. The primary lesson I learned in Lifeline was that data collection of vulnerable populations should be easy for the service user while being relevant and useful to the service provider. This enables the service provider to introduce reforms based on what they learn from the data, the benefits of which can be passed back to the service user.

When I started the research for this PhD I did so because housing and homelessness were (and remain) key issues in Ireland both socially and politically. What I did not realise was how challenging the data collection would be. State bodies, service providers and researchers in Ireland are all acutely aware that despite the huge amount of time, effort and resources put into reducing homelessness, nothing thus far has made a significant impact on the rising rates of homelessness in Ireland. As I have discussed at length in this thesis, the system as it currently operates does not work. The type of accommodation used as EA needs to change and access to permanent housing to improve, in order for it to be successful. The message that homelessness is caused by a combination of individual and structural factors has been largely accepted but the systemic changes needed to make a real difference have yet to materialise. The lack of progress has led to increasing tension among those who work in the homelessness sector. State bodies are trying to deliver the required change in a system that is inoperable, while non-profit service providers are calling on those state bodies to do more and do it faster. Anecdotally, some researchers are refusing to engage in any more interviews with people who experience homelessness until the research findings from the last twenty years are seen to be put into practice. There are also concerns the publication of research will expose how bad the situation is, which can then be used to publicly criticise either state bodies, non-profit service providers or both.

My experience throughout my PhD research was unique in that I worked with a service provider (Focus Ireland which sponsored the research as part of the Irish Research Council Enterprise Partnership Postgraduate Scholarship Scheme), a state body (the Dublin Regional Homeless Executive which provided the data) and my research institution (University College Dublin). To a certain extent this has allowed me to see the sector from all three perspectives. Ultimately, what I have learned is that most people involved in homeless service provision, funding and research are working to solve this problem. People are trying really hard to make things better, even bending (sometimes breaking) or making exceptions to rules to make sure people get some sort of support. They are trying and failing to solve this problem. The anger, frustration and grief are palpable within the sector and yet people get up every day to fail again in the hope that tomorrow it will be different.

As a researcher and an outsider this has been very difficult to watch. I have had to learn to tread carefully, to respect the relationships I have forged and to choose with care how I speak on issues. The process has made me, in my own opinion, a better researcher. What I hope I can give in return is information, to be able to say it is not you, the system is broken and here is how we can change it. We can eliminate hostel accommodation for single adults. Instead, we can give them their own space, safety and dignity. We can deliver services that meet people where they are in life and not presume that they need everything fixed for them, but rather to listen to what needs fixing. We can expand support services which help people to tackle their problem in a compassionate and productive environment. We can build more social housing (a mammoth task but a necessary one) and make sure that people have affordable and secure housing available to them in which to make homes. We can, ultimately, reach functional zero homelessness and ensure that no one in Ireland is forced out into the cold.

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Appendix One

Reasons for Exclusion of Cases

1,975 individual PASS IDs have been excluded from the final data set. The reasons for exclusion were:

- An individual had only been homeless in another region (n = 149). These cases occurred when an individual from another region stayed in EA in the Dublin region in order to access specific services, particularly healthcare. They have been removed from this analysis as once they received their service they returned to their region. The EA and service they used would have been organised and paid for by their region and their reason for travel would be based on the location of required services.

- An individual had never physically presented to emergency accommodation (n= 196). In some cases, an individual will register on PASS and book a bed in EA but never present to service. These individuals have been removed as while they did register, they have never been recorded as staying in EA or sleeping rough. There is very little information recorded for these individuals as they do not engage with services.

- An individual entered homelessness prior to 2016 (n= 33). These cases were identified during data collation from PASS accounts. When the reports for new presentations were run, the system had included them but when their individual profiles were examined it was clear that they had used EA prior to the 01/01/2016.

- An inappropriate data of birth was recorded for an individual (n= 2). These individual were identified when the 'age at first presentation' variable was created. They were deemed to be inappropriate as both individuals would have been over 110 years old when they first entered EA. DRHE staff members did follow up on unusual cases identified during this research and in these cases the researcher was not informed of confirmation of age. Based the rarity of this age range in the population, the accompanying account information and conversations between the researcher and staff in the DRHE it was considered highly unlikely that these ages were correct.

- A duplicate PASS ID was found (n= 2). In some cases an individual was mistakenly registered on PASS more than once. When this situation occurred in the dataset gathered for this thesis the profile information was merged. These cases were reported to the DRHE who confirmed the duplication and merged the profiles on PASS.

- The PASS ID recorded no longer existed (n= 125). These were profiles which had been identified as duplicates prior to data collation for this thesis beginning. It is assumed that the individuals for whom these profiles were created were still included in the dataset if their presentation date fell within the research target years. It was not possible to confirm this or to identify which PASS IDs had been merged.

- An individual was identified as being part of a family unit (n= 1,468). In most cases, these individuals were fathers whose accounts had not be linked to their partners despite their being accommodated together. These were identified through case notes. However, other individuals' situations meant defining 'family' was complicated in this research. Ultimately the decision was based on accommodation type, if people were accommodated in a family unit, specifically with children under the age of 18 (siblings or grandchildren in most cases) they were considered to be in family homelessness.

Appendix Two

Significance Tests

Table 0.1 Age and EA Entry Transition Variables

Correlations

		Age when first presented	Previous Accommodation	Reason
Age when first presented	Pearson Correlation	1	-.074[**]	.026
	Sig. (2-tailed)		.000	.164
	N	3669	3084	2852
Previous Accommodation	Pearson Correlation	-.074[**]	1	.286[**]
	Sig. (2-tailed)	.000		.000
	N	3084	3084	2593
Reason	Pearson Correlation	.026	.286[**]	1
	Sig. (2-tailed)	.164	.000	
	N	2852	2593	2852

[**]. Correlation is significant at the 0.01 level (2-tailed).

Table 0.2 Age Cohorts and EA Entry Transition Variables

Correlations

		Age Groups	Previous Accommodation	Reason
Age Groups	Pearson Correlation	1	-.073[**]	.013
	Sig. (2-tailed)		.000	.472
	N	3669	3084	2852
Previous Accommodation	Pearson Correlation	-.073[**]	1	.286[**]
	Sig. (2-tailed)	.000		.000
	N	3084	3084	2593
Reason	Pearson Correlation	.013	.286[**]	1
	Sig. (2-tailed)	.472	.000	
	N	2852	2593	2852

[**]. Correlation is significant at the 0.01 level (2-tailed).

Table 0.3 Gender and EA Entry Transition Variables

Correlations

		Male	Previous Accommodation	Reason
Male	Pearson Correlation	1	-.004	-.059**
	Sig. (2-tailed)		.825	.002
	N	3669	3084	2852
Previous Accommodation	Pearson Correlation	-.004	1	.286**
	Sig. (2-tailed)	.825		.000
	N	3084	3084	2593
Reason	Pearson Correlation	-.059**	.286**	1
	Sig. (2-tailed)	.002	.000	
	N	2852	2593	2852

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.4 Citizenship and EA Entry Transitions

Correlations

		Citizenship	Previous Accommodation	Reason
Citizenship	Pearson Correlation	1	-.077**	.018
	Sig. (2-tailed)		.000	.336
	N	3669	3084	2852
Previous Accommodation	Pearson Correlation	-.077**	1	.286**
	Sig. (2-tailed)	.000		.000
	N	3084	3084	2593
Reason	Pearson Correlation	.018	.286**	1
	Sig. (2-tailed)	.336	.000	
	N	2852	2593	2852

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.5 Age and Transitions Through EA Variables

Correlations

		Age when first presented	Time and Consistency Cluster	Exits During EA
Age when first presented	Pearson Correlation	1	.067**	.010
	Sig. (2-tailed)		.000	.838
	N	3669	3669	408
Time and Consistency Cluster	Pearson Correlation	.067**	1	.119*
	Sig. (2-tailed)	.000		.017
	N	3669	3669	408
Exits During EA	Pearson Correlation	.010	.119*	1
	Sig. (2-tailed)	.838	.017	
	N	408	408	408

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.6 Age Cohorts and Transitions Though EA Variables

Correlations

		Age Groups	Time and Consistency Cluster	Exits During EA
Age Groups	Pearson Correlation	1	.062**	.043
	Sig. (2-tailed)		.000	.389
	N	3669	3669	408
Time and Consistency Cluster	Pearson Correlation	.062**	1	.119*
	Sig. (2-tailed)	.000		.017
	N	3669	3669	408
Exits During EA	Pearson Correlation	.043	.119*	1
	Sig. (2-tailed)	.389	.017	
	N	408	408	408

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.7 Gender and Transitions Through EA Variables

Correlations

		Male	Time and Consistency Cluster	Exits During EA
Male	Pearson Correlation	1	.001	-.036
	Sig. (2-tailed)		.933	.468
	N	3669	3669	408
Time and Consistency Cluster	Pearson Correlation	.001	1	.119[*]
	Sig. (2-tailed)	.933		.017
	N	3669	3669	408
Exits During EA	Pearson Correlation	-.036	.119[*]	1
	Sig. (2-tailed)	.468	.017	
	N	408	408	408

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.8 Citizenship and Transitions Through EA Variables

Correlations

		Citizenship	Time and Consistency Cluster	Exits During EA
Citizenship	Pearson Correlation	1	-.069[**]	-.059
	Sig. (2-tailed)		.000	.238
	N	3669	3669	408
Time and Consistency Cluster	Pearson Correlation	-.069[**]	1	.119[*]
	Sig. (2-tailed)	.000		.017
	N	3669	3669	408
Exits During EA	Pearson Correlation	-.059	.119[*]	1
	Sig. (2-tailed)	.238	.017	
	N	408	408	408

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.9 Age and Transitions Out of EA Variables

Correlations

		Age when first presented	Support After Leaving EA	AHN	Long Term Bed Occupancy	Still Using EA	Departure Accommodation
Age when first presented	Pearson Correlation	1	.115**	.015	.082**	.050**	.089**
	Sig. (2-tailed)		.000	.355	.000	.003	.000
	N	3669	3669	3669	3669	3669	2538
Support After Leaving EA	Pearson Correlation	.115**	1	.108**	-.157**	-.189**	.242**
	Sig. (2-tailed)	.000		.000	.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
AHN	Pearson Correlation	.015	.108**	1	.263**	.220**	.166**
	Sig. (2-tailed)	.355	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
Long Term Bed Occupancy	Pearson Correlation	.082**	-.157**	.263**	1	.834**	.b
	Sig. (2-tailed)	.000	.000	.000		.000	.000
	N	3669	3669	3669	3669	3669	2538
Still Using EA	Pearson Correlation	.050**	-.189**	.220**	.834**	1	.b
	Sig. (2-tailed)	.003	.000	.000	.000		.000
	N	3669	3669	3669	3669	3669	2538
Departure Accommodation	Pearson Correlation	.089**	.242**	.166**	.b	.b	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	2538	2538	2538	2538	2538	2538

**. Correlation is significant at the 0.01 level (2-tailed).

b. Cannot be computed because at least one of the variables is constant.

Table 0.10 Age Cohorts and Transitions Out of EA Variables

Correlations

		Age Groups	Support After Leaving EA	AHN	Long Term Bed Occupancy	Still Using EA	Departure Accommodation
Age Groups	Pearson Correlation	1	.105**	.024	.072**	.043**	.091**
	Sig. (2-tailed)		.000	.145	.000	.009	.000
	N	3669	3669	3669	3669	3669	2538
Support After Leaving EA	Pearson Correlation	.105**	1	.108**	-.157**	-.189**	.242**
	Sig. (2-tailed)	.000		.000	.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
AHN	Pearson Correlation	.024	.108**	1	.263**	.220**	.166**
	Sig. (2-tailed)	.145	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
Long Term Bed Occupancy	Pearson Correlation	.072**	-.157**	.263**	1	.834**	.b
	Sig. (2-tailed)	.000	.000	.000		.000	.000
	N	3669	3669	3669	3669	3669	2538
Still Using EA	Pearson Correlation	.043**	-.189**	.220**	.834**	1	.b
	Sig. (2-tailed)	.009	.000	.000	.000		.000
	N	3669	3669	3669	3669	3669	2538
Departure Accommodation	Pearson Correlation	.091**	.242**	.166**	.b	.b	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	2538	2538	2538	2538	2538	2538

**. Correlation is significant at the 0.01 level (2-tailed).

b. Cannot be computed because at least one of the variables is constant.

Table 0.11 Gender and Transitions Out of EA Variables

Correlations

		Male	Support After Leaving EA	AHN	Long Term Bed Occupancy	Still Using EA	Departure Accommodation
Male	Pearson Correlation	1	-.031	-.021	-.007	.015	-.055**
	Sig. (2-tailed)		.062	.196	.663	.376	.005
	N	3669	3669	3669	3669	3669	2538
Support After Leaving EA	Pearson Correlation	-.031	1	.108**	-.157**	-.189**	.242**
	Sig. (2-tailed)	.062		.000	.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
AHN	Pearson Correlation	-.021	.108**	1	.263**	.220**	.166**
	Sig. (2-tailed)	.196	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	2538
Long Term Bed Occupancy	Pearson Correlation	-.007	-.157**	.263**	1	.834**	.b
	Sig. (2-tailed)	.663	.000	.000		.000	.000
	N	3669	3669	3669	3669	3669	2538
Still Using EA	Pearson Correlation	.015	-.189**	.220**	.834**	1	.b
	Sig. (2-tailed)	.376	.000	.000	.000		.000
	N	3669	3669	3669	3669	3669	2538
Departure Accommodation	Pearson Correlation	-.055**	.242**	.166**	.b	.b	1
	Sig. (2-tailed)	.005	.000	.000	.000	.000	
	N	2538	2538	2538	2538	2538	2538

**. Correlation is significant at the 0.01 level (2-tailed).

b. Cannot be computed because at least one of the variables is constant.

Table 0.12 Citizenship and Transitions Out of EA Variables

Correlations

		Citizenship	AHN	Still Using EA	Long Term Bed Occupancy	Departure Accommodation	Support After Leaving EA
Citizenship	Pearson Correlation	1	-.168**	-.017	-.021	-.082**	-.042*
	Sig. (2-tailed)		.000	.293	.211	.000	.011
	N	3669	3669	3669	3669	2538	3669
AHN	Pearson Correlation	-.168**	1	.220**	.263**	.166**	.108**
	Sig. (2-tailed)	.000		.000	.000	.000	.000
	N	3669	3669	3669	3669	2538	3669
Still Using EA	Pearson Correlation	-.017	.220**	1	.834**	.c	-.189**
	Sig. (2-tailed)	.293	.000		.000	.000	.000
	N	3669	3669	3669	3669	2538	3669
Long Term Bed Occupancy	Pearson Correlation	-.021	.263**	.834**	1	.c	-.157**
	Sig. (2-tailed)	.211	.000	.000		.000	.000
	N	3669	3669	3669	3669	2538	3669
Departure Accommodation	Pearson Correlation	-.082**	.166**	.c	.c	1	.242**
	Sig. (2-tailed)	.000	.000	.000	.000		.000
	N	2538	2538	2538	2538	2538	2538
Support After Leaving EA	Pearson Correlation	-.042*	.108**	-.189**	-.157**	.242**	1
	Sig. (2-tailed)	.011	.000	.000	.000	.000	
	N	3669	3669	3669	3669	2538	3669

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

c. Cannot be computed because at least one of the variables is constant.

Table 0.13 Age and Experience of Pre EA Contributory Events

Correlations

		Age when first presented	Institutional Experience Pre EA	Health Experiences Pre EA	Homeless Experience Pre EA	Life Experiences Pre EA	Multiple Experiences Pre EA
Age when first presented	Pearson Correlation	1	-.059**	.005	-.029	-.006	-.021
	Sig. (2-tailed)		.000	.754	.081	.721	.213
	N	3669	3669	3669	3669	3669	3669
Institutional Experience Pre EA	Pearson Correlation	-.059**	1	-.059**	.049**	-.109**	.165**
	Sig. (2-tailed)	.000		.000	.003	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Experiences Pre EA	Pearson Correlation	.005	-.059**	1	.121**	-.091**	.314**
	Sig. (2-tailed)	.754	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Experience Pre EA	Pearson Correlation	-.029	.049**	.121**	1	.014	.647**
	Sig. (2-tailed)	.081	.003	.000		.407	.000
	N	3669	3669	3669	3669	3669	3669
Life Experiences Pre EA	Pearson Correlation	-.006	-.109**	-.091**	.014	1	.242**
	Sig. (2-tailed)	.721	.000	.000	.407		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Experiences Pre EA	Pearson Correlation	-.021	.165**	.314**	.647**	.242**	1
	Sig. (2-tailed)	.213	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.14 Age Cohorts and Experiences of Pre EA Contributory Events

Correlations

		Age Groups	Institutional Experience Pre EA	Health Experiences Pre EA	Homeless Experience Pre EA	Life Experiences Pre EA	Multiple Experiences Pre EA
Age Groups	Pearson Correlation	1	-.049**	.004	-.014	-.011	-.005
	Sig. (2-tailed)		.003	.785	.407	.501	.741
	N	3669	3669	3669	3669	3669	3669
Institutional Experience Pre EA	Pearson Correlation	-.049**	1	-.059**	.049**	-.109**	.165**
	Sig. (2-tailed)	.003		.000	.003	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Experiences Pre EA	Pearson Correlation	.004	-.059**	1	.121**	-.091**	.314**
	Sig. (2-tailed)	.785	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Experience Pre EA	Pearson Correlation	-.014	.049**	.121**	1	.014	.647**
	Sig. (2-tailed)	.407	.003	.000		.407	.000
	N	3669	3669	3669	3669	3669	3669
Life Experiences Pre EA	Pearson Correlation	-.011	-.109**	-.091**	.014	1	.242**
	Sig. (2-tailed)	.501	.000	.000	.407		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Experiences Pre EA	Pearson Correlation	-.005	.165**	.314**	.647**	.242**	1
	Sig. (2-tailed)	.741	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.15 Gender and Experiences of Pre EA Contributory Events

Correlations

		Male	Institutional Experience Pre EA	Health Experiences Pre EA	Homeless Experience Pre EA	Life Experiences Pre EA	Multiple Experiences Pre EA
Male	Pearson Correlation	1	.063**	.005	.018	.007	.030
	Sig. (2-tailed)		.000	.741	.279	.669	.065
	N	3669	3669	3669	3669	3669	3669
Institutional Experience Pre EA	Pearson Correlation	.063**	1	-.059**	.049**	-.109**	.165**
	Sig. (2-tailed)	.000		.000	.003	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Experiences Pre EA	Pearson Correlation	.005	-.059**	1	.121**	-.091**	.314**
	Sig. (2-tailed)	.741	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Experience Pre EA	Pearson Correlation	.018	.049**	.121**	1	.014	.647**
	Sig. (2-tailed)	.279	.003	.000		.407	.000
	N	3669	3669	3669	3669	3669	3669
Life Experiences Pre EA	Pearson Correlation	.007	-.109**	-.091**	.014	1	.242**
	Sig. (2-tailed)	.669	.000	.000	.407		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Experiences Pre EA	Pearson Correlation	.030	.165**	.314**	.647**	.242**	1
	Sig. (2-tailed)	.065	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.16 Citizenship and Experiences of Pre EA Contributory Events

Correlations

		Citizenship	Institutional Experience Pre EA	Health Experiences Pre EA	Homeless Experience Pre EA	Life Experiences Pre EA	Multiple Experiences Pre EA
Citizenship	Pearson Correlation	1	-.098**	-.090**	-.015	.582**	.096**
	Sig. (2-tailed)		.000	.000	.372	.000	.000
	N	3669	3669	3669	3669	3669	3669
Institutional Experience Pre EA	Pearson Correlation	-.098**	1	-.059**	.049**	-.109**	.165**
	Sig. (2-tailed)	.000		.000	.003	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Experiences Pre EA	Pearson Correlation	-.090**	-.059**	1	.121**	-.091**	.314**
	Sig. (2-tailed)	.000	.000		.000	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Experience Pre EA	Pearson Correlation	-.015	.049**	.121**	1	.014	.647**
	Sig. (2-tailed)	.372	.003	.000		.407	.000
	N	3669	3669	3669	3669	3669	3669
Life Experiences Pre EA	Pearson Correlation	.582**	-.109**	-.091**	.014	1	.242**
	Sig. (2-tailed)	.000	.000	.000	.407		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Experiences Pre EA	Pearson Correlation	.096**	.165**	.314**	.647**	.242**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

Table 0.17 Age and Experiences of Contributory Events

Correlations

		Age when first presented	Homeless Event	Health Event	Life Event	Institutional Event	Multiple Transitions
Age when first presented	Pearson Correlation	1	-.070**	.027	-.050**	-.151**	-.105**
	Sig. (2-tailed)		.000	.104	.002	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Event	Pearson Correlation	-.070**	1	.176**	-.008	.122**	.690**
	Sig. (2-tailed)	.000		.000	.648	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Event	Pearson Correlation	.027	.176**	1	-.124**	.003	.387**
	Sig. (2-tailed)	.104	.000		.000	.872	.000
	N	3669	3669	3669	3669	3669	3669
Life Event	Pearson Correlation	-.050**	-.008	-.124**	1	-.040*	.528**
	Sig. (2-tailed)	.002	.648	.000		.016	.000
	N	3669	3669	3669	3669	3669	3669
Institutional Event	Pearson Correlation	-.151**	.122**	.003	-.040*	1	.345**
	Sig. (2-tailed)	.000	.000	.872	.016		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Transitions	Pearson Correlation	-.105**	.690**	.387**	.528**	.345**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.18 Age Cohorts and Experiences of Contributory Events

Correlations

		Age Groups	Homeless Event	Health Event	Life Event	Institutional Event	Multiple Transitions
Age Groups	Pearson Correlation	1	-.072**	.033*	-.046**	-.117**	-.091**
	Sig. (2-tailed)		.000	.045	.005	.000	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Event	Pearson Correlation	-.072**	1	.176**	-.008	.122**	.690**
	Sig. (2-tailed)	.000		.000	.648	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Event	Pearson Correlation	.033*	.176**	1	-.124**	.003	.387**
	Sig. (2-tailed)	.045	.000		.000	.872	.000
	N	3669	3669	3669	3669	3669	3669
Life Event	Pearson Correlation	-.046**	-.008	-.124**	1	-.040*	.528**
	Sig. (2-tailed)	.005	.648	.000		.016	.000
	N	3669	3669	3669	3669	3669	3669
Institutional Event	Pearson Correlation	-.117**	.122**	.003	-.040*	1	.345**
	Sig. (2-tailed)	.000	.000	.872	.016		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Transitions	Pearson Correlation	-.091**	.690**	.387**	.528**	.345**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.19 Gender and Experiences of Contributory Events

Correlations

		Male	Homeless Event	Health Event	Life Event	Institutional Event	Multiple Transitions
Male	Pearson Correlation	1	.032	-.002	-.064**	-.032	-.028
	Sig. (2-tailed)		.050	.917	.000	.052	.086
	N	3669	3669	3669	3669	3669	3669
Homeless Event	Pearson Correlation	.032	1	.176**	-.008	.122**	.690**
	Sig. (2-tailed)	.050		.000	.648	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Event	Pearson Correlation	-.002	.176**	1	-.124**	.003	.387**
	Sig. (2-tailed)	.917	.000		.000	.872	.000
	N	3669	3669	3669	3669	3669	3669
Life Event	Pearson Correlation	-.064**	-.008	-.124**	1	-.040*	.528**
	Sig. (2-tailed)	.000	.648	.000		.016	.000
	N	3669	3669	3669	3669	3669	3669
Institutional Event	Pearson Correlation	-.032	.122**	.003	-.040*	1	.345**
	Sig. (2-tailed)	.052	.000	.872	.016		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Transitions	Pearson Correlation	-.028	.690**	.387**	.528**	.345**	1
	Sig. (2-tailed)	.086	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).

Table 0.20 Citizenship and Experiences of Contributory Events

Correlations

		Citizenship	Homeless Event	Health Event	Life Event	Institutional Event	Multiple Transitions
Citizenship	Pearson Correlation	1	-.031	-.118**	.495**	-.048**	.210**
	Sig. (2-tailed)		.061	.000	.000	.004	.000
	N	3669	3669	3669	3669	3669	3669
Homeless Event	Pearson Correlation	-.031	1	.176**	-.008	.122**	.690**
	Sig. (2-tailed)	.061		.000	.648	.000	.000
	N	3669	3669	3669	3669	3669	3669
Health Event	Pearson Correlation	-.118**	.176**	1	-.124**	.003	.387**
	Sig. (2-tailed)	.000	.000		.000	.872	.000
	N	3669	3669	3669	3669	3669	3669
Life Event	Pearson Correlation	.495**	-.008	-.124**	1	-.040*	.528**
	Sig. (2-tailed)	.000	.648	.000		.016	.000
	N	3669	3669	3669	3669	3669	3669
Institutional Event	Pearson Correlation	-.048**	.122**	.003	-.040*	1	.345**
	Sig. (2-tailed)	.004	.000	.872	.016		.000
	N	3669	3669	3669	3669	3669	3669
Multiple Transitions	Pearson Correlation	.210**	.690**	.387**	.528**	.345**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	3669	3669	3669	3669	3669	3669

**. Correlation is significant at the 0.01 level (2-tailed).

*. Correlation is significant at the 0.05 level (2-tailed).